THE

NEW JERSEY MEDICAL REPORTER.

VOL. VI. THIRD MONTH (MARCH.), 1853. No. 6.

Biographical Memoir of Prof: George B. Wood, M. D., of Philadelphia.

In presenting to our readers the promised portrait of Prof: George B. Wood, M. D., of Philadelphia, we are glad of the opportunity to furnish the following brief notice of his life and public services.

Dr. Wood is descended from a family of Friends, who were among the early settlers of the city of Philadelphia. They came from England, and continued residents there till early in the last century, when they removed to Greenwich, then of Salem, now of Cumberland county, in this State. The family name has been honorably known in that region of New Jersey for several generations; and Richard Wood, the great grandfather of the Doctor, served as one of the Judges of the first court of the county, as far back as 1748.*

Dr. Wood was early sent to school in New York city, where he remained about three years, chiefly employed in the study of the Latin and Greek languages. After this, he went to Philadelphia and entered the collegiate department of the University of Pennsylvania, where he graduated in January, 1815, taking the first honors. Immediately after this, he entered the office of the late Dr. Joseph Parrish, of Philadelphia, as a private pupil, and remained with him till he graduated in medicine in the spring of 1818. Shortly afterwards, he commenced the practice of medicine, rose rapidly in public estimation, and succeeded beyond expectations.

Soon after receiving the Doctorate, he was engaged by his preceptor as an assistant in the education of his office pupils; and continued to perform the duties of this position for eleven or twelve years. His first regular course of lectures was delivered to a class of medical students, and a few *gentlemen* not engaged in the study of medicine, in 1820. They were on the subject of chemistry. Here we may digress a moment to observe that a certain writer for the Boston Medical Journal, in Vol.

* See Historical Collections of New Jersey, by Barber and Howe, page 143.

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XLI. p. 236, is incorrect in the statement that Dr. W. "was invited by the ladies of Dr. P's family to deliver lectures (popular) on chemistry," and that "from this he was transplanted to the chair of chemistry in the young and humble College of Pharmacy."

Dr. W. never lectured to a class of ladies, nor did he ever deliver a strictly *popular* course on any subject. In the summer of 1822, he was chosen Professor of chemistry in the Philadelphia College of Pharmacy: lecturing at the College during the winter, and to a class of medical students, on *materia medica*, in the summer.

In January 1830, he united with his former preceptor, and several medical friends, in forming the Philadelphia Association for medical instruction, in which he also lectured on materia medica.

In 1831, he was transferred from the chair of chemistry to that of materia medica, in the College of Pharmacy, and has not lectured on chemistry since.

In October, 1835, he was elected Professor of Materia Medica and Pharmacy, in the University of Pennsylvania, when he resigned from the two institutions with which he had been previously connected. This chair in the University was occupied with great success, till he was called by the Trustees to fill the place of the venerable Chapman, as Professor of the Theory and Practice of medicine; which distinguished position he now holds.

We have thus far spoken of Dr. Wood as a student, and a lecturer. It becomes us now, to glance briefly at his career as an author. In earlier life, he contributed freely to various journals, medical, pharmaceutical, and literary, and was for several years one of the Editors of the North American Medical and Surgical Journal. One of his first efforts was in the preparation of the History of the University of Pennsylvania in 1827, which was published in a separate form, and in the Memoirs of the Historical Society of Pennsylvania, Vol. III, pt. 1. But Dr. Wood's labors in the revision of the U. S. Pharmacopœia, for 1830, 1840, and 1850, are among his most useful contributions to science. In these labors he was first associated with Dr. Franklin Bache, and the late Dr. T. T. Hewson, under appointment by the College of Physicians, of Philadelphia; and subsequently he acted as a member of the committee of revision, appointed by the National Convention at Washington. While engaged in this laborious duty, he first conceived the idea of preparing the U. S. Dispensatory, which he did in conjunction with his distinguished associate, Dr. Bache, now Professor of Chemistry in the Jefferson Medical College. This work, of which Dr. Wood wrote the

parts connected with the vegetable materia medica, and Dr. Bache those of the mineral department, was first published in the year 1833; since which time it has passed through nine editions. It is *the* standard work of physicians and druggists all over our land, to be found in almost every office, and on the counter of every careful apothecary. In 1847, Dr. Wood first issued his Systematic Treatise on the Practice of Medicine, in two volumes, which has been received at home and abroad, with almost unexampled favor, by the medical public, and in the short term of less than six years, has gone through three large editions.

Early in his career as a practitioner, Dr. Wood served as a physician to several public charities, among which was the Philadelphia Dispensary, with which he was connected for five years.

In 1835 he was chosen as one of the physicians of the Pennsylvania Hospital, which place he now holds, availing himself of the opportunity thus afforded, to impart many practical lessons as a clinical instructor to the inquiring student, and at the same time to cheer the unfortunate victim of disease by the smile of kindness, and the hand of science.

Omitting to notice the more ordinary incidents of Dr. Wood's life, and the many honorary appointments that have been held by him, we may be permitted to name *one* which affords us peculiar pleasure. We refer to the fact, that he was received by a unanimous vote of the New Jersey Medical Society, at its eighty-seventh annual meeting, as an honorary member. Thus has the profession of his native State, by offering him their highest gift, exhibited their exalted appreciation of his talents, and well deserved reputation. ED.

A Case of Occlusion of the Vagina. By ALEX. ELWELL, M. D.

February 21st, 1851, I was called to Mrs. ——, aged 38, found her flooding very considerably,—but by the usual means, such as Acet. Plumbi. with opium, frictions over the abdomen, &c., the hemorrhage was arrested without much difficulty—ordered light diet, and rest in the horizontal position. 22d, Found her doing as well as we could expect under the circumstances. 23d, much the same—the night of the 23d was called again, and found her much worse than before; I now used ergot and the tampon, by which the flooding was again arrested; from this time she seemed to be doing well, until March 12th, when (in my absence), Dr. Woolston was called in, and found her flooding again. Upon examination he removed, (what the patient assures me, was her womb,) but what the Dr. says was a retained placenta, her youngest

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child being then three years old. In a very short time after this body (whatever it may have been) was taken away, our patient began to convalesce rapidly. May 3d, was again requested to see her; found her sitting up and sewing—looking quite as well as I had ever seen her. Upon inquiry, she told me that she was not sick, but "since the removal of her womb," (she still insisting that it is gone,) the *vagina* had entirely closed, which upon examination I found to be really so, though I confess I had some misgivings as to the truthfulness of it, until I had satisfied myself. The union of the walls of the vagina is so complete, as to give the impression that it was never otherwise. As regards her health at this time, she assured me that she had not felt better for two or three years, upon which, I thought it best "to let well enough alone," and did not prescribe. Since her illness there has been no effort to *menstruate*, (nor any detriment to her health on account of the absence of the catemenia, though, she previously had been quite regular,) until September 14th, 1852, at which time Dr. W. was called again, and found her complaining of pain in her head, loins, and lower extremities: believing the trouble to depend on the absence of the catemenia, he took from the arm ℥iv. blood, and ordered a brisk cathartic, which relieved her; just twenty-eight days from Dr. Woolston's visit, I was called, and found her much the same, as stated above. The same treatment repeated, and I have heard nothing from her since.

So much for the synopsis of the case. As regards the absence of the catemenia and occlusion of the vagina, I am unable to assign any very satisfactory reason. Dr. Woolston, in conversation with myself, not long since, said he thought the absence of the menstrual discharge, and the coalition of the walls of the vagina to be depending upon the following circumstances; namely—The presence of the retained placenta, occasioned much inflamation, and when removed, a large portion of the mucous membrane adhered, and was also removed, upon which the inflamed walls of the uterus and vagina came together and united—hence there being little or no mucous membrane left, there of course could be no secretion of menstrual fluid. Now the Dr's. reasons for the non-appearance of the menses and occlusion of the vagina seem to me quite plausible, but I cannot help expressing a doubt as to whether a placenta could be retained three years, and occasion no more trouble than this did. Being out of town at the time this body was removed, I cannot say it was not a retained placenta, but I have thought there was a probability of its having been, a putrified fœtus—I do not give this as anything but a supposition.

The above case was written for publication, because I thought it might be interesting to others of our profession, as it has been to me.

VINCENTOWN, January 27th, 1853.

Fracture of the Os Coccyx, during difficult Labor.

By C. H. CLEAVELAND, M. D.

On the 28th of January, 1848, I was called upon to attend Mrs. A. in labor, if I recollect correctly, with her fifth child. On my arrival, I was told that at her *two* previous confinements she had suffered very severely from obstructed labor, and that after delaying in each case, as long as it was thought the safety of the mother would allow, the child had been destroyed and separated in parts, before it could be removed. As the mother had previously borne at least two living children, without any very unusual difficulty, I made special inquiries to learn if possible, what obstructions her former attendants, (at the two last confinements she had been assisted by different physicians), had discovered, as the cause of her misfortune, and I could not learn that any reason had been mentioned why she had suffered more than at her previous confinements.

As labor had been in progress for some time previous to my being summoned, I at once made an examination, and found the head of the child presenting in the natural position, and pressing firmly at the outlet of the pelvis. The head was so far advanced that I could not learn the capacity of the pelvic cavity, or the condition of the upper part of it; but at once I discovered a prolonged depression from nearly at the top of the head, downward almost to the top of the nose, and following that depression with my finger, I discovered that the os-coccyx was bent forward, and the lower extremity had made the depression in the head which had attracted my attention. Supposing it possible that I had discovered the cause of the difficulty in her former labors, (during the latter of which the head had remained impacted in the pelvis for several days before it was removed,) I explained the nature of the obstruction, and then learned, that some years previously she had slipped upon the ice, and had fallen in a sitting position, when she so injured her spine, that it was several weeks before she could walk without severe distress.

After explaining my intentions, and obtaining the consent of the patient, I returned the head of the child, sufficiently to allow me to put both thumbs above the dislocated bone, and making a very strong effort,

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I *broke* it near the angle, when the lower portion readily yielded to the advance of the child's head, and soon a full-sized healthy boy was born, without farther difficulty, or severe pain. The mother was told to be very cautious and not allow the bone to become displaced, and in the usual period she had resumed her household duties.

On the 14th of April, 1851, I was again called to attend on Mrs. A., when I found the bone projecting forward somewhat more than usual, and obstructing the canal, so that I applied the forceps, and again relieved her of a large sized and healthy child, after which the recovery was rapid and satisfactory. Within a few weeks I have attended on her for premature labor, and find the bone in nearly its normal position, and not tender or painful.

During my pupilage, my preceptor, Dr. S. H. Smith, related to me a similar case, that occurred in his practice; but whether the child was saved, or the bone replaced, I do not now recollect, but I have an impression that the child was destroyed.

Dr. Summers reported a somewhat similar case in the American Journal of Medical Science, for October, 1850, of a woman who had previously lost *three* children, in the last of which the cranium presented a deep gash, as if it had been cut with a sharp instrument. In this case, the os coccygis was not only bent forward, but the point of it was turned up so as to form a *hook*. As the Doctor recollected what had occured at the former confinements, he tried to straighten this hook, when he fractured the bone, and it was bent backward out of the way, so that a living child was born. At two subsequent labours, he was obliged to refracture the coccyx, and each time the operation was successful in saving the child.

As Dr. Summers says nothing about the pain from the fracture being severe, we may conclude it was not greatly so. In my case, the patient said it was not to be compared with the suffering she endured from the pains of labor, after the child's head had become fixed.

My experience in this, and some other cases where the former labors had been very severe or protracted, have led me to *insist* on being summoned as early as possible after the commencement of labor, that I may have an opportunity of carefully examining the pelvic canal, before the child's head has descended, so as to obstruct the examination.

WATERBURY, VERMONT, February, 1853.

Case of Stricture of Œsophagus. By WILLIAM JOHNSON, M. D.

Among the many ills to which flesh is heir, strictures of those canals which are lined by the mucous membrane, are far from being the least interesting, whether considered with respect to the sufferings both mental and physical, which they produce; or the imminent danger to which they often subject the unfortunate individuals, who are the victims of their visitation. Memory recalls many cases illustrative of these truths, particularly two fatal cases of stricture of the œsophagus, which occurred in this region of country, since my settlement here. The first case, I did not myself see, but had the relation from his widow. He died a few weeks after my settlement. He was young, but absolutely starved to death, after protracted sufferings, in full consciousness of his dreadful condition. The other case, I saw but once, and that a short period previous to her death. She too died from inanition. Professor Dorsey in his Surgery, relates a case of stricture of the œsophagus, where the post mortem examination revealed an almost entire obliteration of the canal; a probe could scarcely pass through the strictured part. Velpeau and other writers, cite cases of complete obliteration of the passage.

It is not my purpose to enter into speculation, as to the causes of these affections, whether they be owing to ulceration in some portions of these canals, producing narrowing by the contractions of their cicatrices in healing, or congestion and infiltration in the adjacent tissues whilst the ulcerative process is still going on, or whether simple spasmodic action be prominent in their production. But any light which can be thrown upon this subject by the record of individual cases, is due to the medical public, and it is under an imperative sense of duty, that I am induced to present the following case of stricture of the œsophagus.

I was consulted, the 23d of last July, by M—— C——, aged about 22 years, on account of stricture of the œsophagus. Her attention was called to it, about two years since. She was eating a piece of pickled cucumber, and was choked, and still more so very shortly afterwards, in eating a pear. Since then, the disease has been gradually increasing. Early in her disease, she could swallow nothing but liquid articles, or solid food very thoroughly masticated, and swallowed in very minute portions at a time. In fact, for some considerable time back, she has avoided taking any solid food; particularly animal, it chokes her even when well masticated, and swallowed in minute portions—liquid food sometimes does the same. She became very much alarmed, in consequence of the arrest of a very small cherry stone in her œsophagus, about the 30th of June last. She was eating a cherry, and the stone accidentally

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slipped into the œsophagus, and produced the greatest distress by being arrested there. She resides about two miles from me. In my absence, my son speedily saw her. He directed a solution of tartarized antimony to be held in her mouth; it produced great nausea, and in an effort to vomit the stone was ejected. This patient is anæmic, probably from insufficient nutrition. Her appetite for food is good, but she is unable to take sufficient nourishment. The catamenia are regular. Ocular inspection of the fauces elicited nothing abnormal.

As tentative measures, I put her for a short time on tinct. ferri. chlor., iodid. potas., and applied an epispastic to the throat. The difficulty of deglutition was not in any degree relieved by these means. I now resorted to the bougie. My bougies were prepared, by saturating strips of muslin in melted bees wax, and when cold, cutting those pieces in such shape, as when rolled up tight they would be gently tapering. They were made of various sizes, from $\frac{1}{8}$ of an inch to $1\frac{1}{4}$ of an inch in circumference. I commenced, by introducing the smaller sized, and found difficulty in passing these, but the difficulty rapidly gave way, and in a few weeks I passed the larger sized with ease. The size that I used for the greatest length of time, was $1\frac{1}{8}$ inches in circumference. I finally passed very readily $1\frac{1}{4}$ of an inch in circumference.

The stricture, I found to be situated some inches below the termination of the pharynx. I passed the bougie some inches below the stricture, which did not appear to occupy a very large extent of surface. A sense of resistance at the stricture in passing the instrument through it, was experienced. After passing it a few times, most decided relief was obtained by the patient. She visited my office, nearly every alternate day, for three months, and the bougie was introduced at every visit, either by myself, or my son.

The sense of suffocation, produced by the presence of the bougie in the œsophagus, was very distressing to the patient, and she could bear it but a short time at each introduction. I generally passed it twice or three times every visit which she paid me, which was much facilitated by covering it well with glycerine.

In using the instrument, I departed from the the directions given by Velpeau. He advises depressing the tongue with a spoon-handle or other instrument. This I did not find necessary, and he says nothing about throwing the patient's head far back, which I found very important. My method of introducing the instrument was, to have the patient supported by an assistant standing behind her. The assistant was directed to bring the patient's head far back, so as to render the

passage from the mouth into the throat as straight as possible, the instrument would then, by a very slight curve in it, readily pass down into the œsophagus. Its introduction was rendered easier by the patient protruding her tongue (which she could do with ease) from her mouth. The patient experienced no pain from the operation; nothing but the strangulation above spoken of.

The improvement in this case, was decided, from almost the first introduction of the bougie, until I pronounced her cured. I suggested, however, at parting with her, that it would be advisable to have the instrument passed occasionally into the œsophagus, but she found herself so completely relieved that she did not return, and I learn that she remains well, and has married since. Her mother stated, but two or three days since, that she swallows her food with perfect ease; the bougie has not been introduced since October last—nearly four months.

Remarks.—The chief point of interest in this case is, the rapidity with which it yielded to treatment. The case I would contrast with one related by Dr. Jameson, of Baltimore, in the 29th No. vol. viii., of the Medical Recorder, Jan. 1825; edited by Samuel Calhoun, M. D., of Philadelphia. The Doctor's case is a very interesting one, and will pay well for the perusal. Dr. Jameson passed ivory balls of different sizes, attached to a stem, upon which they were secured, nearly every day for ten months, before he considered his patient cured. My patient was cured by the bougie passed every alternate day for three months. Whether this result was owing to the different kinds of instruments employed, or in my case being a less serious one, I do not pretend to decide. Dr. Jameson's patient too, was a female, but more advanced in life than mine; his being about 40 years of age, and his case, too, was of two years standing. For more than a fortnight he did not succeed in obtaining any advantages: but by indomitable perseverance, obtained complete success. His patient was one year under treatment. These two cases, in addition to others, give ground for encouragement in persevering attempts to dilate strictures, and it may yet be found, that well directed manipulation may obviate the necessity for resorting to the caustic, in the management of these cases.

White House Village, Feb. 14, 1853.

BIBLIOGRAPHICAL NOTICES.

The Transactions of the American Medical Association. Instituted 1847—vol. v. pp. 935.

After a good deal of delay, this long expected volume has reached our table. Why it should have been more than half a year in getting dressed by the printer, we cannot tell, and we will not now stop to inquire. It is mainly composed of the reports on epidemics, from the various States of the union, and this feature of the work gives to it a practical interest which neither of the preceding volumes has offered. It brings together a large amount of fact, and maintains the current history of disease in all parts of our country, which must, we think, increase the demand for the Transactions, and add materially to the general interest of the Association in every State.* The three reports on amendments to the Constitution, are the only ones that can be noticed otherwise than by a passing reference. These, claiming a large share of professional attention at the present time, and so soon to come up for discussion, and decision, will be remarked upon in our Editorial Department.

Manual of Physiology: By WILLIAM SENHOUSE KIRKES, M. D., Licentiate of the Royal College of Physicians; Registrar and Demonstrator of morbid Anatomy, at St. Bartholomew's Hospital; assisted by JAMES PAGET, F. R. S., Lecturer on General Anatomy and Physiology, at St. Bartholomew's Hospital. Second American, from the second London edition, with one hundred and sixty-five illustrations; pp. 568 Philadelphia: Blanchard and Lea, 1853.

This valuable work on Physiology, having rapidly run through the first American edition, again presents itself to the physician and student. No essential changes being necessary, the American editor issues the volume in nearly the same form as the last English edition, with the addition of a larger number of illustrations. The reputation which this Manual has attained, is sufficient proof of its merits; and as it has been reprinted from the second English edition, which was carefully revised, and all the recent improvements in physiological science added, it is still deserving of full confidence.

What to observe at the Bed-side and after death, in Medical Cases. Published under the authority of the London Medical Society of Observation. Philadelphia: Blanchard and Lea. 1853, pp. 205.

This is the title of a book that is alike curious and valuable. The members of the Society named in the title page, determining to analyze, and arrange their clinical observations, with a view of arriving at great-

* Dr. Flint's Prize Essay forms a prominent part of the work, and the several reports on special scientific subjects are inserted in full.

er precision in their bed-side experience, have furnished a table by which there may be a critical comparison as well as a clear exhibition of all the symptomatic appearances in disease: believing that errors in diagnosis are more frequently the result of deficient examination of, and searching for, all possible evidences of disease, than to misrepresentations in regard to the more prominent expression of morbid phenomena. It may be a good remembrancer to such as may use it; serving to direct their attention to certain appearances, particularly in obscure cases, which might escape the notice of an ordinary observer, its object being, to give instruction in a systematic clinical examination of patients.

Quarterly Summary of the Transactions of the College of Physicians of Philadelphia, from Nov. 3, 1852, to Jan. 5, 1853, inclusive.

This welcome quarterly is again on our table. We love to study its pages, not because of its merit only, but because it is the medium through which many well known friends express their sentiments on a variety of medical questions. The present issue is embellished with a good steel engraving of the late Dr. S. G. Morton, of Philadelphia, accompanied by a biographical memoir of his life, read before the College, by Prof. Wood. Several interesting articles are presented, among which are (by Dr. Hays,) an account of a splint, with a wood cut, for the treatment of fractures of the lower end of the radius, somewhat similar to Dr. Bond's splint, but preferred by Dr. Hays; and a record of successful treatment of a case of tape worm, by recent pumpkin seeds, at Wills's Hospital—by Dr. Wood, the history of a case of diabetes, treated with yeast, in which the quantity of urine is diminished one half, and its specific gravity is considerably less." Dr. Wood is inclined to the opinion that the elimination of sugar with the urine is prevented by the use of the remedy—and thinks that it has claims to notice, and ought to be tried by the profession.

Remarks on the bites of venomous serpents, and reptiles with cases, are offered by Dr. Edward Hallowell, and Dr. Samuel Jackson; and the history of a fatal case of gall-stone, read by Dr. Thomas H. Yardley. Other papers of interest, with discussions, might be referred to, but time and room fail us.

EDITORIAL.

Amendments to the Constitution of the American Medical Association.

As the most prominent question in medical politics among us, at this time, is that having reference to the adoption of one of the three plans proposed in the several reports upon the subject of amending the Constitution of the American Medical Association, which were presented at its last meeting, it is proper that we should consider them. The first report

signed by Drs. Hays and Storer, proposes a modification of the present Constitution, so as to confine the representation to members of State and County Medical Societies, and to the Faculties of chartered Medical Colleges, under certain conditions prescribed in the report. These conditions, not measuring up to the standard hitherto established, and still maintained by the Association, we respectfully enquire whether, if this modification should be agreed to, the great Medical Congress of the nation will not involve itself in an inconsistency, which will at *once* cripple its influence with the profession, and impair *their* confidence in its usefulness. This inconsistency may be rendered apparent by a slight examination. It is proposed that "no State or County Society shall have the privilege of representation, which does not require of its members an observance of the code of ethics of this Association;" and yet it is not intended that no Medical College shall have the privilege of representation, which does not require of its Faculty, and its pupils, an observance of the standard which has been adopted for the regulation of medical teaching, and the admission of students. True, if such a rule should be adopted, it would exclude most of our medical schools; but it would not exclude the professors who would be delegated by their State and County Societies; neither would it contribute to the promotion of unkind feeling, because, professors in common with others, have agreed upon the standard of medical education, admit its propriety, and have manifested no wish to withdraw, or lessen it, and therefore ought not to claim the privilege of violating it, any more than a *lay member* (if we *must* use the term) should claim the privilege of violating the code of ethics, under certain circumstances, though he should acknowledge his fealty thereto. This it seems to us is unjust, and we submit, if it will not be better to lower the standard to a point that will meet the objectionable system of medical education that is so much complained of, and to improve which, the Association was formed, than to adopt the proposition contained in this report: for if adopted, it will of course be considered as a retrograde movement, though Dr. H. says it "should not be," and the usefulness of the organization be materially impaired.

The minority report is signed by Dr. Yardley. With reference to the question of delegation, *it* assumes, that State and County Societies shall be the only legitimate sources of representation; and that professors should find their way to the Association by the same path that others do. It also adopts the view, that the present system gives a preponderance of influence and power to physicians from the large cities, to the disadvantage of country practitioners; and that by the restriction proposed,

not only will county organizations be increased in number, but in influence and usefulness. If it be, as none will deny, that professors add weight and dignity to the Association, and that upon the question of medical teaching particularly, their experience and aid are greatly needed; how much good they would do to the smaller societies in States and Districts, and how they would improve the general tone of medical opinion, and the strength and stability of local organizations, by uniting with them.

The third committee was appointed at Richmond, to report "in definite and proper form such amendments as will embrace the views set forth" in the other two reports, "and such other views as may appear to them advisable." This committee have certainly availed themselves of the latitude derived from the latter clause, in a manner quite unexpected. It was supposed to have been their province to condense and arrange for comparison the opposing views presented in the previously noticed reports, having the liberty of course, to make what suggestions might occur to them. In the exercise of this, they propose to continue the representation from all Medical Societies, chartered or voluntary, in the proportion of ten per cent, restricting the representation from Colleges and Hospitals, to one delegate from each Faculty, and to one from each of the Hospitals "comprising accommodation for not less than one hundred patients."

This proposition strikes directly at the purpose, and intention, of both the other reports. It adds, what they both cut off, and hence, is more objectionable than either. It opens the door at once, for all voluntary Medical Associations, whether Eclectic, Botanic, Homœopathic, or any other, that may take the form of a Medical Society for the purpose of introducing its members to the great fraternity of medicine in our country, and of gaining for them an eagerly sought fellowship therewith. We hope, certainly, it will not pass.

We must not omit to mention another proposed alteration, independent of all the rest. It was offered by Dr. Wilson, of Virginia, who gave notice that it would be called up at the next meeting, as an amendment. It is as follows:

"The Faculty of every chartered Medical College, acknowledging its fealty to the code of ethics, and conforming to the requisitions of this Association on the subject of medical education, as adopted at the session of 1846, and reiterated at the subsequent sessions, shall have the privilege of sending one delegate to represent it in the Association: *Provided*, that the Medical Faculty of the University of Virginia shall be entitled to representation in this Association, in consequence of its peculiar or-

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ganization, but only so long as its peculiar system of instruction and examination shall continue in force."

At the ensuing meeting to be held in New York, this vexed question will probably be decided. It is important that it should be properly decided. If it has been fairly stated in this hastily written article, and if the statement will contribute to a right judgment in the minds of our delegates, we shall feel abundantly compensated for the little effort it has cost us, and shall rejoice if the voice of New Jersey may be heard, in favor of the State and County representation only.

"JESHURUN WAXED FAT AND KICKED."

In an editorial, in the January number of the Charleston Medical Journal, an appeal is made to publishers of medical Periodicals, strictly to adhere to their published rules concerning payment in advance. It is there more than intimated, that some physicians retaliate on editors and publishers, the treatment they themselves receive from many of their patients, who, after running up a bill with one doctor, get "out" with him and call in another; so these "patrons" of Medical Periodicals, when one publisher becomes importunate for his dues, forthwith stop their journals and subscribe to another! The Charleston Journal *is right*, and we are glad to see this evidence of the prosperity of the work; for no one can afford to be very independent, without material to go upon. By reference to the last page of cover, it will be seen that we have adopted the principle suggested by our cotemporary, and *we* also intend that it shall be like the laws of the Medes and Persians, which *change not.* A reference to past numbers of the Reporter will show that we have for some time been preparing for this step, and every new name added to our list, has brought us nearer to it. We trust this movement will be a general one among publishers, for there is nothing that will do more to add to the dignity and efficiency of our periodical medical literature.

RANKING'S HALF-YEARLY ABSTRACT.

We have received from the American publishers of this valuable abstract of the progress of Medical Science, the number for January, being a retrospect of the last half of the year 1852.

The work is enlarged and improved, and Dr. Ranking has associated with him in his labors, Dr. C. B. Radcliffe. We are pleased to see that the Editors avail themselves of the labors and observations of American

practitioners. We shall probably have occasion to draw from the pages of the work hereafter. In the mean time, we would recommend our readers to supply themselves from the publishers, Lindsay and Blakiston, Philadelphia.—Terms, $2 per annum. *Postage free, when paid for in advance.*

EDITOR'S TABLE.

Registration of Births, Marriages, and Deaths in Massachusetts, for the year ending Dec. 31, 1851. We are under obligations to the author, Josiah Curtis, M. D., for a copy of this valuable report, which has come too late for extended notice in our present number. We shall endeavor to notice it more in detail hereafter.

New York Journal of Pharmacy. The first number of the second volume of this valuable monthly lies before us. The contents are of a character to interest both the physician and the apothecary. The work is published by authority of the College of Pharmacy, of the city of New York. Edited by Benjamin W. McCready, M. D., assisted by a committee of five apothecaries. Thirty-two pages a month: three dollars a year in advance.

The Dublin Medical Press. We heartily respond *aye* to our transatlantic cotemporary in his desire to exchange, and shall be very glad to receive his weekly visits, and promise ourselves and our readers much pleasure and profit therefrom. We would say to Dr. Jacob, that though we are humble and unpretending in appearance, we nevertheless, represent one of the oldest medical Societies in America, and that our contributors, being mostly country practitioners, are among the most practical physicians and writers on this side the water. Herein we pride ourselves. As in the present number we give a fine portrait of one of our most distinguished physicians, we shall hope, particularly after the commencement of the next volume, to introduce to our foreign readers, the features of many a living American worthy, with whose names they are familiar. The *Press* is a weekly journal of sixteen pages, large 8vo., filled with matter of great interest to the medical man, bearing evidence of much care and labor. Price, per number, sixpence, stamped. Arthur Jacob, M. D., editor and proprietor, Dublin, Ireland.

One of the most important results of the formation of our National Medical Association, has been the investigation by competent individu-

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als, of special subjects, requiring too extended notice to be admitted into the pages of even our largest class of medical periodicals. These monographs are extensively circulated among the members of the profession, both through the voluminous transactions of the Association, and by means of extra copies of special reports struck off for their various authors, for private distribution. We have before us the *Prize Essay* for 1852, "*On variations of pitch in percussion and respiratory sounds, and their application to physical diagnosis.*" By Austin Flint, M. D., of Buffalo, N. Y. To the author of this Essay was awarded a prize of fifty dollars, by a committee of the Association. We have received also, from the author, a report "*On the action of water on lead pipes, and the diseases proceeding from it.*" By Horatio Adams, M. D., of Waltham, Mass. The Transactions of the Association are noticed elsewhere in this number. We may have occasion to refer to these reports again.

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MISCELLANY.

Dr. Marshall Hall, the well known author of several works on physiology and medicine proper, expects to visit this country. He was to leave London on the first of February.

The degree of Doctor of Medicine was conferred on fifteen gentlemen on the 26th of January, by President Woolsey, of Yale College. The Faculty of the medical department of that College has lost the services of Prof. Silliman, Sen'r., who has for forty years discharged the duties of Professor of Chemistry. His resignation was accepted with regret, and complimentary resolutions passed.

The New York State Medical Society met at Albany, on the 1st of Feb., continuing in session *three days.* The principal subjects of discussion seem to have been the treatment of croup, and the use of chloroform. Dr. Burwell had used chloroform in 180 obstetrical cases, all of which, but three, were benefitted by its use. There was no unpleasant result in any case. Dr. Barker, Dr. Shipman, and others, confirmed Dr. Burwell's observations. The operation of tracheotomy in croup, was upheld only in cases where performed in the early stages of the disease. Tracheal croup would, no doubt, be benefitted by such an operation, but could it be of any possible advantage where the bronchial tubes are involved? We think not.

"An exchange paper states that sixty students in the medical department of the University of Louisville, Ky., are to be seen every Sabbath morning in the Sabbath School of the Chestnut St. Presbyterian Church, diligently engaged in the study of the Holy Scriptures, under the instruction of Drs. Yandell and Silliman, two of the University Professors."

To our mind, the above simple announcement speaks volumes in favor

of the young gentlemen referred to. We shall fear nothing for the science of medicine when it is in the hands of competent men, of established christian principles. As a rule, it is not they who are "carried about by every wind" of medical doctrine.

It appears by the U. S. Census, that the consumption of spirituous and malt liquors, reaches the enormous quantity of eighty-six millions of gallons annually, equal to six gallons for every adult person!

Congress has appropriated $100,000 for the purpose of erecting a Government Asylum, for the insane in the District of Columbia, and appointed to the superintendence of it, *Dr. Charles H. Nichols*, formerly Dr. Brigham's assistant at Utica, N. Y., and more recently superintendent of Bloomingdale Asylum, near New York.

Dr. A. K. Gardner recently read an interesting and highly useful report before the New York Academy of Medicine, on the *varieties and conditions of the meats used in the city of New York*. The quality of the meat he considers, in the main, unexceptionable, but finds occasion to offer the following resolutions:

Resolved, That in the opinion of the New York Academy of Medicine, humanity requires that the transportation and conveyance of neat-cattle, calves, sheep, and swine, to this city, and from one part of it to another, their proper care and sustenance before being killed, and the prevention of unnecessary cruelty, should be made the subject of penal enactment.

Resolved, That the attention of the proper authorities is particularly called to the more stringent enforcement of the laws respecting the killing of diseased animals, and to the vending of unhealthy and immature meats.

DEATHS.

Died—In London, Jan. 20, *Jonathan Pereira*, M. D., F. R. S., in the 49th year of his age. In Dr. Pereira, whose work on Materia Medica and Therapeutics is a lasting monument to his genius and assiduity, science is called to mourn the loss of one of her most distinguished votataries.

—— In Cincinnati, Jan. 30, *Prof. Sears C. Walker*, in the 48th year of his age. Prof. Walker was a distinguished mathematician, and was at the time of his death connected with the U. S. Coast Survey.

—— In New Orleans, Dec. 31st, *Dr. William B. Shelden*, formerly of Beverly, Mass.

—— At New Lebanon, Ohio, *Dr. John Thompson*, æt 74.

—— At Darien, Genesee County, N. Y., *Dr. David Long*, æt 91.

—— In Dover, Vt., *Otis Howe*, M. D., æt 22.

—— At Astoria, N. Y., *Dr. Junius Smith*, the first to introduce the growing of tea in America.

—— At Andover, Vt., *Dr. Charles Chandler*, æt 81.

—— At Charleston, S. C., of yellow fever, *Dr. John A. Cleveland*.

ECLECTIC AND SUMMARY DEPARTMENT.

Wry Neck Cured Without Cutting. By GURDON BUCK, M. D., Surgeon to New York Hospital.—The success obtained in the following cases of Distortion of the Head, commonly known as Wry Neck, induces the undersigned to make them known to the profession, in order that the treatment employed, which it is believed has not hitherto been applied in such cases, may be fully subjected to the test of experience.

Case First. Hester Higgins, a native of Ireland, aged 25 years, unmarried, was admitted into the New York Hospital on the 6th of Nov. 1848, at which time she had suffered from rheumatism already about seven months; all the larger joints of the body having been successively affected. About four months prior to her admission, she suffered a relapse, after having nearly recovered, and since then she has experienced but little alleviation of her ailments. Her neck, as well as most of her larger joints are painful, though not much swollen. Her tongue is slightly furred, her pulse is 85, and soft; her skin moist, and bowels regular.

On the 19th of January following, she had nearly recovered from her rheumatism, under treatment, except rigidity and contraction of the muscles of the right side of the neck, by which the head was drawn downwards and towards the right shoulder. To relieve this distortion, frictions, with stimulating and oleaginous liniments were diligently employed, and, subsequently, sulphuric ether was applied to the neck. Some slight improvement resulted from the use of these means. On the 18th of April, however, the condition of the neck had for some time been stationary, and all hope of further benefit was abandoned. The motions of the head were very much restricted, and any attempt to overcome the resistance of the rigid muscles by stretching them, occasioned severe pain. The rigidity did not appear to reside in the sterno-mastoid muscle, inasmuch as this muscle did not grow hard and stiff when efforts were made to elevate the head; the resistance was evidently seated in the deeper muscular and tendinous parts.

At the request of my colleague, Dr. Swett, of the Medical Division, I saw this patient, and proposed to make cautious attempts to overcome the resistance by force, the patient being first subjected to the influence of sulphuric ether. Considering the resistance to depend on contracted muscular and tendinous fibres, my object was either to stretch or rupture them, and in doing this, no danger was apprehended to the important nerves and blood-vessels of the neck; since the forced movement necessary to accomplish this object, would fall far short of the extensive motions in every direction to which these parts are accustomed naturally to accommodate themselves.

Dr. Swett assenting to my proposal, the patient was laid upon her back in bed, with her head resting high up on a pillow, so as to be easily got at from the head of the bed. Taking the head between my hands, placed one on either side, I cautiously stretched it with a very moderate degree of force, in the direction opposite to that in which it was distorted, that is, upwards and to the left side. Almost immediately every one standing round the bed (of whom there were at least eight or ten pupils and medical men,) was startled by a loud snapping sound of something rupturing, and at the same time I perceived that the head yielded, and could be brought almost to its natural position. It was thought prudent to proceed no further at this operation. The patient on recovering her consciousness was not sensible of any new soreness in the parts, and could bear the head to be moved much easier than before the operation. She was directed to lie as much as possible on her left side. On the following day there was considerable soreness on the right side of the neck. On the 25th of April, one week after the first operation, the soreness of the neck having very much diminished, the operation was repeated a second time.

The proceedings were the same as in the first operation, only the stretching was carried to a much greater extent, and with a much less timid hand. Several times resisting fibres were felt to yield with a rupturing sensation, till, at length, no further resistance was encountered, and the head could be carried to the full extent in every direction. After the effects of the ether had passed off, the head was bandaged down towards the left shoulder. On the 1st of May, the bandage being dispensed with, the head showed no disposition to resume its distorted attitude. On the 10th of May (1849,) the head could maintain, unaided, its erect natural position, though rotation and flexion were still limited in extent, and performed awkwardly; the patient however, was sensible of progressive improvement in these respects. She took her discharge from the Hospital for the purpose of returning to her friends in Ireland. About one year afterwards she was heard from as continuing well, and free from any distortion or rigidity of the neck.

Case Second. In January, 1852, Maria P——, of Guilford, Connecticut, aged 12 years, and of a healthy constitution, came under my care, with the head very much distorted from being drawn down towards the chest, with the face turned to the left side. The motions of the head were also very much restricted. In the month of July preceding, she had been attacked with sore throat and stiff neck, that left her ever since in the condition just described. She had never suffered from rheumatism in any other part of her body, and had generally enjoyed good health. I at once decided to employ the treatment which had been so successful in the preceding case; and on the 15th of January, having first etherized my patient, I performed the first operation. In order to carry the extension of the head to the requisite degree, it became necessary to have her supported in the sitting posture in a chair, and to place myself in front of her. Grasping the head between my hands, I acted on it in the various directions in which resistance was encountered, but felt no sensation

of rupturing fibres, in this or in any of the subsequent operations. The resisting parts, however, yielded in some measure, and allowed the head to be brought more nearly into its natural position. No pain was experienced from the operation on recovering her consciousness.

On the 19th, no effect was observable from the first operation; it was therefore repeated a second time, with the aid of ether. On the 24th, 26th and 30th of January, and on the 4th and 7th of February, it was also repeated, each time with the aid of ether. Though a gradual improvement was perceptible from these repeated operations, it became evident that a complete cure could only be achieved by a patient and persevering repetition of them for a long time; it was therefore judged most prudent to continue the operations without the aid of ether. The patient's courage and endurance, though put to a very severe test, proved adequate to the trial. Once every day she submitted with the most admirable fortitude to the stretching process, for about ten minutes each time. This was continued up to the 1st of March, after which it was repeated twice every day. The manner of manipulating was as follows: The patient was seated in a chair, and her body steadied by an assistant standing behind her and holding her shoulders firmly with both hands. Placing myself in front of her, I grasped her head with my hands, in such a way as to perform most efficiently the different movements I wished to execute. These movements were varied in every direction in which resistance was encountered, my object being to stretch to the utmost the contracted muscles, and to maintain them on a stretch for a certain length of time. The process was painful only during its actual performance, and ceased to be so the moment it was discontinued. On the 24th of March, the operations were suspended, while the patient made a visit to her family, and were resumed again on the 8th of April. During this interval, no relapse took place. The same course of treatment was continued till the 10th of May, when she returned to her home, highly gratified at being able to maintain her head by her own efforts, in its natural erect position, and to turn it in different directions almost as well as ever she could. She was advised to continue for a long time, the daily practice of performing the various motions of the head as extensively as possible. On the 13th of January, 1853, I conversed with an aunt of my patient, who had recently visited her, and who reports that she holds her head in a very natural manner, and can move it at pleasure, freely in every direction. In a word, she considers herself quite well again, and without any disposition to relapse.—*N. Y. Med. Times.*

121 *Tenth st. January* 20, 1853.

An Efficacious Expectorant and Sudorific.—A practitioner in Vermont transmits the following recipe, which claims the consideration of physicians at this particular season.

Thinking it the duty of every physician, when he has come across a remedy of *superior* efficacy, to inform the profession of it, I take this opportunity to forward a recipe for your disposal. ℞. Tinct. lobeliæ, f ℥ ss.; tinct. sanguinariæ, f ℥ ij.; ol. menthæ viridis, f ʒ ss.; syr-

upus empyreumaticus, f ℥ v. (5) M. Give half a tea-spoonful at bed-time, or one in two hours, until it relieves. The above is of magical efficacy; I have known it used for some eight years; have used it much to my own benefit, given it liberally to my patients, and some of my fellow physicians have used it at my suggestion, much to the advantage of their patients. I use it in catarrhal affections, spasmodic croup, pertussis, asthma, &c.; in fact, in all cases where an expectorant and sudorific are indicated. And it always meets my fullest expectations. I also find it very efficacious in subduing mucous inflammations about the *throat* and air passages. I ask of those who have not tried a similar preparation, to try *this;* and I think they will no more use hive-syrup for children. * * * * * * *

The properties of these articles (lobelia and sanguinaria) being so combined, the relaxing properties of the one with the stimulating of the other, makes them much more efficacious and innocent in all complaints where either the one or the other has been found advantageous, especially for children.—*Boston Med. and Surg. Journal.*

Solvent for Disulphate of Quinia.—Tartaric acid has been recommended as a better solvent for the disulphate of quinine, than diluted sulphuric acid, the agent usually employed for this purpose. One-third of the weight of the quina salt is a sufficient proportion of the tartaric acid to effect complete solution, which is by no means unpleasant to the taste,—a great improvement on the intense bitterness of the ordinary solution of this salt, made with diluted sulphuric acid.—*London Journal Med.*, from *Med. Times.*

New Mode of Administering Iodine.—M. Hannon says, that by placing five to twenty grains of iodine in a fold of cotton wadding, and sewing it in a piece of linen, and applying it to the part affected, the iodine acts very rapidly. It must be covered with oiled silk or gutta percha, to prevent it from turning the clothes blue.—*London Journal Med.* from *L' Union Méd.*

Hemorrhage from the Extraction of Teeth. By WILLIAM R. WEBSTER. I see an article of some length in the July No., page 354, Dental News Letter, from A. Berry, D. D. S., referring to Fox, B. B. Brown, Bell, and others, on the best plan of stopping hemorrhage from the extraction of teeth by pressure, which is all right. But permit me to call the attention of ours as well as the medical profession, (as I have never yet found it suggested in any of the popular journals of the day,) to the use of sulph. magnesia in sufficient quantity to operate mildly on the bowels, say 1 ℥. As singular as it may at first appear, it is nevertheless a remedy that has never yet failed in my hands, and one that I universally use in all cases of an endemic or hemorrhagic diathesis, as well from the extraction of teeth as from any other cause, for which it will be found a sufficient styptic, without the use of pressure, as recommended, in from fifteen minutes to half an hour. I believe if it had been used in the

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case referred to by Henry Whitworth, M. D,, as reported on page 400 of the July No. of the Dental News Letter, taken from the London Lancet, it might have proved sufficient. This is why I feel it my duty to make it public, and request for it a trial.—*Dental News Letter.*

Richmond, Ia., 11 *Mo.* 8*th* 1852.

Pills of Iodide of Iron. By JOHN LOINES. The intensely styptic taste of the solution of iodide of iron, as well as the unpleasant stain it imparts to the teeth and lips, is often felt to be a serious inconvenience in the use of this valuable remedy, and has given rise to considerable inquiry by the medical practitioner for some more palatable mode of administering the iodide. Such, however, is the nature of this compound, that it is scarcely to be expected that any form of preparation will supersede the salt with gum or the combination of saccharine matter in various proportions. Meantime it has been proposed, in order to conceal the taste of the officinal solution, to enclose it in capsules, or, by the addition of suitable substances, to make it a mass capable of being formed into pills. It has even been thought advisable to evaporate the solution till it should acquire a suitable consistence for this purpose. To the capsules the expense will probably be urged as an objection by some, while their liability to leak, unless made with more than ordinary care, will be found a constant source of complaint. On the other hand, although it is easy enough, by the addition of gum, to make a mass that can be rolled into pills, the bulk of this adjuvant, in connection with that of the sugar already employed, renders the dose inconveniently large. It was in view of these objections that the writer, about a year ago, devised the plan of making a very concentrated syrup of the iodide of iron, which may be readily made into pills, two or three of which contain the ordinary dose of that medicine, and having made use of them in his own case, for a considerable time, with advantage, he would respectfully recommend them to the favorable notice of physicians and pharmaceutists. The formula he employs is the following, viz:

Take of iodine (dry) - - - -	℥j.
fine iron wire, cut in pieces - -	ʒiij.
Sugar, in powder - - - -	℥ij. ʒij.
Water - - - - -	f. ℥iss.

Measure 2½ fluid ounces of water into a three or four ounce phial, and mark upon it the height at which the liquid stands, then pour out the water and introduce the sugar in its stead. Proceed, with the other ingredients, to make the solution of iodide of iron, in the same manner as in the formula of the U. S. P., taking care to use a flask or matruss of the capacity of only 3 or 4 ounces, in order to avoid waste of the materials. The filter employed should also be very small, (from one to two inches in depth) and its apex must be protected by a small cap of muslin, without which, a rent is almost certain to occur; or, a small piece of fine linen or muslin might be substituted for the double filter thus formed. Having filtered the liquid into the sugar, shake the phial containing them, and suspend it in a vessel of hot water until perfect solution

takes place. If the product measures less than 2½ fluid ounces, add simple syrup to make up the deficiency.

This concentrated syrup is four times the strength of the officinal solution, and should contain, by calculation, twenty-nine grains of the dry oxide in every fluid drachm. As some loss is, however, unavoidable, the proportion is actually rather less.

To prepare the pills, two fluid drachms of the concentrated syrup are to be triturated in a mortar, with 3 drachms of powdered gum arabic, and the mixture set aside for several hours, during which time it acquires the consistence of very stiff paste, but needs the addition of a little more gum, which should be worked in the hand, to make it into pills. When brought to the proper consistence, it is to be divided into 60 pills, each of which may be assumed to contain the equivalent of 8 minims of the officinal solution of iodide of iron. They do not become hard by keeping; some have been kept a year, and then beaten anew, into a mass, and made again into pills. Neither does any perceptible alteration appear in their color, taste or smell.—*N. Y. Journal of Pharmacy.*

New York, 12*mo.* 21, 1852.

On the Hereditariness of Phthisis. By Dr. Hervieux. Dr. Hervieux's object is to contribute some facts towards the solution of the question, as to the *mode* in which tubercles are propagated from parent to child, and at what period these become developed. He quotes the results of 711 autopsies made at the Hospital des Enfans Trouvées. Of this number, about 400 were less, and 300 more than 15 days old. Of the 711, tubercles were only found in 32; a fact sufficiently remarkable for those who know the frequency with which tubercles occur in young children. But it is to be observed, that these 32 cases are not equally distributed among the 711 children; and the chief value of the present communication lies in its insisting upon this distinction. Thus, among the 400 children who had not passed their 15th day, tubercles were only found in 2; one 11, the other 13 days old. In the other 300 children, they were found 30 times—viz: 8 times in children from 15 days to one year; 8 times in from 1 to 2 years; 10 times in from 2 to 3 years; and 4 times in from 3 to 5 years (very few children above 3 years, being, however, received into the infirmary.) Examining the distribution of the cases which occur between 15 days and 1 year, we find none prior to the 4th month; 1 at the 4th, 1 at the 6th, 2 at the 9th, 2 at the 11th, and 3 at the 12th. Thus the rarity of tubercles in infants extends not only to the first fortnight, but the first four months—the parent evidently only transmitting the predisposition to disease. In private practice, it may be expected to be still stronger.—*Med. Chir.*, vol. xi. p. 331.—*from Boston Med. Journal.*

Autopsy of the Hon. Daniel Webster.—[From an article in the American Journal of Medical Sciences, we extract the following description of the post-mortem appearances, &c., by his physician, Dr. John Jeffries.]

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The autopsy was made by Dr. J. B. S. Jackson, who furnished the following report :—

Autopsy thirty-two hours after death; present Drs. Jeffries, Porter, J. Mason Warren, Wyman, Parkman and Jackson.

The emaciation was very marked, as shown by the state of the integuments and muscles; the latter being wasted, pale, and flabby.

Abdomen.—The peritoneal cavity contained eleven pints of serum. There were also old and strong adhesions about the spleen, the gall-bladder, the cæcum, and to a small extent between the left extremities of the arch of the colon and the parietes of the abdomen.

The stomach was distended, and contained half a pint of very dark blood, about one half of which was in a state of a soft coagulum; and this was the only appearance that was found of coagulum in any part of the body. The mucous membrane was deeply stained by these contents, generally rather soft, and in the pyloric portion somewhat mamellonated. The intestines were opened throughout, washed, and fully examined with reference to the diarrhæa that had so long existed. Blood was found throughout in very considerable quantity as far as the descending colon, below which there was no trace of it; in the large intestine it was altered as usual in color. Mucous membrane stained by the contents so far as blood extended. In the large intestines were numerous herniæ of the mucous membrane, so common in this situation; from many of these small masses of feces or of mucus could be forced out, and these were the only traces of feces that were found. Otherwise the mucous membrane of the intestines appeared quite healthy; there being nowhere any ulceration to explain the diarrhæa, nor ecchymosis connected with the hemorrhage.

The liver was, throughout, very markedly granulated; dense, and contracted in size; the color externally was greenish or bronzed, but internally of a pale red; showing, as we may not very unfrequently observe, the inappropriateness of the term "cirrhosis," which would generally have been applied to the present case. Weight of the organ, three pounds and one-third, avoirdupois. Bile in the gall-bladder nearly black, and of a tarry consistence.

Spleen small, pale, and shrivelled. Investing membrane to some extent opaque, white, thickened, and condensed; the change being probably due to the old peritoneal affection.

Kidneys and pelvic organs healthy.

Thorax.—Old pleural adhesions over nearly the whole of the right side; none on the left. Lower lobe of the left lung and the two lower lobes of the right much congested, and very dark; a change that undoubtedly occurred towards the close of his life, being simply passive.

Heart flaccid; very little blood in cavities, and this was quite liquid. Slight disease of aortal valves, but organ otherwise healthy. Foramen ovale; a small valvular opening existed. Aorta not ossified, except to a small extent in the abdomen.

Head.—The membranes of the brain were most remarkably diseased. In the cavity of the arachnoid was a layer of fibrine which covered al-

most entirely, and about equally, the convexity of both hemispheres; it did not extend, however, beneath or between them, nor about the cerebellum. In the recent state, it had a rather dull, yellowish, infiltrated, œdematous appearance; being one-fourth of an inch in thickness over the upper surface, but becoming gradually more thin on the sides, where it terminated in a thin edge. The adhesion to the dura mater was in some parts quite close; but it was generally very readily stripped off, and left the arachnoid with its usual polish. It was more adherent to the subjacent membrane; this last being irregular, and having generally a clouded and slightly opaque appearance, with many milk-white spots, but without any appreciable thickening. The quantity of serous effusion into the membranes was altogether large. The subarachnoid tissue corresponding to the layer of fibrine above described was infiltrated with a straw-colored serum in some places, separating the convolutions from each other; this separation was quite remarkable at the posterior part of the right cerebral hemisphere on its upper surface and near the median line, there being also a slight depression at this part. The dura mater adhered firmly to the calvaria, but was healthy in structure, as were the membranes otherwise; there was, however, a serous infiltration into each plexus choroides; though no more, if not less than usual, into the lateral ventricles. No appearance of recent meningitis; and no effused blood or cysts in or about the false membrane. The brain itself was perfectly healthy; and the arteries at the base very nearly so. Cranium healthy. Over the right frontal region a scar existed, the result of the injury that occurred last May; integuments not otherwise remarkable.

A portion of the fibrine from the arachnoid cavity having been removed for microscopical examination, it was found, some hours afterwards, and when the serum with which it had been infiltrated was absorbed, to have almost the consistence of one of the natural tissues of the body; being strong enough to bear considerable traction; it also appeared then to have somewhat of a laminated structure, and bloodvessels were distinctly seen in it even with the naked eye. Dr. Wyman found it "organized, and, in some places vascular. Under the microscope, the lymph was resolved into minute fibres, like those forming the white fibrous element of areolar tissue, and including in their meshes large numbers of minute granules."

Recapitulating the points of interest in this case, it will be observed that the immediate cause of death was hemorrhage from the stomach and bowels. For this, no source could be found in the lesion of any vessel; it must, therefore, be regarded as a simple exhalation dependent upon a disorganization of this fluid, indicated, moreover, by the almost entire absence of coagulation. The relation of this hemorrhage, to the disease of the liver, will also be noted as coinciding with previous experience; it being well known that, in certain cases where there is an altered action of this organ, there is a tendency to disorganization of the blood, manifesting itself thus in hemorrhage.—*N. Y. Medical Gazette.*

Enlargement of the Uterus.—Dr. C. D. Meigs was desirous of calling the attention of the Fellows to certain affections of the uterus in which

an erroneous diagnosis is liable to be made—simple, curable enlargements being mistaken for cases of hypertrophy with change of structure. The uterus, he would premise, is an organ peculiar in respect to this circumstance, that it is naturally designed to undergo considerable and repeated changes in its condition; acquiring a physiological hypertrophization from which, upon the cause inducing this change being withdrawn, it returns rapidly to its normal size. The uterus of the non-gravid female measures about two and a half inches in length, about one and three-quarters in breadth across the *body*, and three-quarters of an inch in thickness; weighing about two ounces. When conception takes place, the uterus sets off on a course of rapid hypertrophic development, becoming at the end of two hundred and eighty days, twelve inches in length, from seven to eight inches in width, and from one and a half to two pounds in weight. After having acquired this size, no sooner is parturition completed, and it is thus emptied of its contents, than it hurries back to its non-gravid condition; the excess of material producing its augmented size being removed by absorption. This is usually effected in from twenty to twenty-eight days. The physiological hypertrophization of the uterus and its subsequent return to its normal non-gravid size may take place in the same individual sixteen, eighteen, or even twenty times.

Now this peculiar physiological law of the uterus renders it especially prone, when subjected to irritation, to undergo a *pathological* hypertrophization; and this condition the physician will be enabled to remove if he can but detect and cure the irritating cause. The hypertrophization may result from retroversion of the uterus, from irritation or ulceration of the cervix, from a rheumatic disease of the organ, or from polypus within its cavity; either of which affections being removed, the enlarged uterus may be expected to return more or less quickly to its normal size. These forms of enlargement of the uterus are not unfrequently mistaken for hypertrophy of the organ accompanied with serious alterations of its structure. Are there any means by which the cases of simple pathological hypertrophy may be distinguished from these latter degenerations? Dr. Meigs remarked, it will almost invariably be found that simple hypertrophy is unattended with any change in the general form of the uterus, whereas in cases of uterine enlargment attended with change of structure, the form of the uterus is always more or less distorted; the distortion being various according as the change of structure and accompanying hypertrophization is chiefly in the cellular tissue, the bloodvessels, the absorbents or the nervous matter of the uterus. Hence, to arrive at a correct diagnosis in cases of enlarged uterus, it is only necessary to ascertain whether the organ preserves its form or not. Dr. M. had been occasionally deceived, he admitted, but very generally he has succeeded, by the test referred to, in arriving at a correct diagnosis. If it is ascertained that the cause of the hypertrophization is under the control of art, then the prognosis is favorable, for if the cause upon which the hypertrophy depends be removed, the uterus will hasten back from its state of hypertrophy to its normal size, as after parturition.—*Transactions of College of Physcians, Philadelphia.*

Adhesion of the Placenta. By J. DOUGLASS, M. D., Chester, S. C. —DR. MAYES, of Sumter, having, in the July number (1852,) of the Journal, related a case which terminated fatally under his care, together with the assistance of Dr. Crane, and having in great candour, and in a manner quite creditable to himself, both as a gentleman and a physician, called upon his more experienced brethren for any suggestions they might make, I feel it a duty to offer the result of my own observations and experience in the management of such cases, and also a few remarks upon his plan of treatment, in the same spirit of frankness which influenced him in his inquiry. I should have responded to a call made in such good faith, in the last issue of the Journal, but supposed that the very able professor to whom the appeal was made, would have given satisfactory answers to an alumnus of an Institution, to the reputation of which he has so largely contributed—a requisition which, I doubt not will soon be complied with. In reference to the treatment of such cases, we find a greater diversity of opinion among authors as to the time to act, than in the mode or manner of procedure. We must, of course, be governed by circumstances. In some instances, when the patient is extremely exhausted, we must, if possible, arrest the hemorrhage for a time, and rally the powers of the system before attempting the extraction. I rely altogether on manipulations. The hand should be introduced with the fingers drawn into a conical form, slowly and cautiously, giving an occasional respite to your efforts, in imitation of the natural process of labor. Great care should be taken that the fingers are introduced between the placenta and uterus, as it frequently happens that the hand is involved in the membranes of the ovum, which will greatly increase the embarrassment of the operation, and the sufferings of the patient. The hand being fairly introduced, we should proceed to detach it slowly with the index finger, while, with the other fingers, the uterus and the placenta should be kept steady. If the palm is kept towards the placenta, there is but little danger, with ordinary care, of injuring the uterus. When the attempt is made, it should be done with a fixed determination to accomplish it. No misgivings should be betrayed in the countenance. The patient should be cheered up with hope, and be permitted to rest occasionally, according to her strength and the violence of the uterine pains. In this way I have succeeded in every case which has fallen under my care in an extensive practice of many years, except some two or three cases of abortion. I will here state, that in cases of abortion, in which the placenta cannot be extracted, I have, in every case, relieved the patient by giving a large cathartic dose of calomel. In such cases as head this communication, I never give ergot, fearing that it might increase the difficulty, by producing irregular contractions of the uterus. I have been repeatedly called in to terminate a labor after the secale cornutum had been administered, in which irregular contractions were present after the delivery of the child, and feel disposed to attribute them to the action of the ergot. Some weeks since, my son, Dr. J. L. Douglass, was called to visit Mrs. E., with her third child. The child was born about an hour before his arrival, and the midwife, in her eagerness to remove the placenta, had

ruptured the cord at the placenta. He found her so much alarmed, and sinking under such profuse hemorrhage, as to induce him to send for me, making, in the mean time, all necessary applications to arrest the flooding. In this case I found, in the whole of the right side of the placenta, the most tenacious adhesions I ever encountered. I succeeded, by continuous efforts, to extract it, though not, perhaps, without leaving particles adherent within the cavity of the uterus. On no former occasion had I to use as much force, and continue my exertions for so long a time. I do not hesitate to say, that there is not one half the danger of injuring the womb, if the manipulations are carefully conducted, that some writers lead us to believe. On the day following, I ordered olive oil and spirits of turpentine to be constantly applied to the abdomen, and her bowels to be opened with castor oil, to which was added a teaspoonful of spirits of turpentine. Her convalescence was much more rapid than I could have reasonably expected. About two years ago, I was compelled to have recourse to manipulations with the same lady. The chief difficulty then was her exhausted condition and frequent faintings, as she had almost literally flooded to death. By active stimulation she rallied a little, and I accomplished the extraction by slow and careful movements. I refer to these two instances, merely as representing a large number occurring under my notice, all of which have yielded to careful but determined efforts to tear away the placenta.

So far as regards the treatment of Dr. Mayes after the extraction, I have no comments to make. I have no doubt but it was proper and judicious. If he erred at all in the management of his case, it was in delay. It is possible, had greater efforts been made when the hand was first introduced, the violent symptoms which ensued, might have been averted. As a general rule, it is not prudent to wait longer than two or three hours, unless the low state of the patient forbids; and even where the patient is very much prostrated and feeble, the extraction should be attempted if the pulse is perceptible at the wrist.

I am truly thankful to Dr. Felder for reporting his case, in which he observed the marked and decided effects of kreosote. It may possibly have been an accidental circumstance; but it seems reasonable, *a priori*, to suppose, from the well-known properties of the article, that its application might produce an hæmostatic effect, and also induce contraction of the uterus by irritation. Its checking the hemorrhage may have been owing to the two effects combined, or to the mechanical operation alone.

The profession will be under still greater obligations to Dr. Felder to report his further trials with this remedial agent, and also to state the precise strength of the preparation he uses.—*Charleston Med. Journal.*

On the Treatment of Chilblains. By M. TROUSSEAU.—M. Trousseau washes all parts affected with chilblains, three times a day with the following lotion:—Borax, 50 parts; water 500. Four table-spoonsful are added to a quart of water. He also prescribes, both for the prevention and removal of chilblains, the following lotion, to be used night and morning:—Sal ammoniac, 20 parts; water, 40; proof spirit, 10. When

ulceration has occurred, he prescribes one of the following formulæ:—Tannin, 10 parts; water, 500. Or, ext. rhatany, 10 parts, quince mucilage, q. s. This is mixed up as a soft electuary, with which the parts are smeared; and the application is also an excellent one for the cracked lips which occur in the winter.—*L'Union Med. Med. Chir. Rev.*

Bite of a Copperhead—"Trigonocephalus Contortix"—treated with Whiskey.—By N. HARRIS MORANGE, M. D., of Abbeville, South Carolina.—On the 21st of June last I was called to see a negro man belonging to Capt. P——, of Abbeville district. Found him partially delirious; skin hot and dry; pulse very much excited, ranging from 100 to 120; left leg and ankle swollen to a great degree. Upon making enquiry into the history of this case, I learned that the patient had been bitten about twelve hours previously by a "trigonocephalus," or, as it is frequently styled in this part of the country, copperhead or highland mockeson. This very poisonous reptile was concealed beneath the step of a *meat-house*, and inflicted a wound upon the inside of the foot, near the ankle joint. I immediately applied a ligature above the seat of affection—prescribed poultices over the wound; and olive oil, ammonia, &c., internally.

22d. The patient is *in statu quo*—no abatement of the swelling, delirious: ordered whiskey, *ad libitum*.

23d. No decided improvement—still anxious, restless, and uneasy; skin hot and dry. Continued the whiskey, combined with capsicum: it was administered until the patient was fully under its influence, without regard to quantity. Left opium to be given if necessary.

24th. Had passed the "crisis." A profuse perspiration was over his entire system; the tumefaction was subsiding; the delirium had ceased; he spoke rationally, and speedily convalesced.

Gibson says—"Of the numerous American serpents, two species only are known to be poisonous—the crotalus or rattlesnake and copperhead." If he includes under the common name of copperhead, both the highland and the water-mockeson, then we concur with him in the assertion. The two latter are of the same family, but not of the same species, which is abundantly manifest by their mode of living.

The same writer says: "These reptiles are more lively, and their venom more active, during very warm weather. Upon the approach of the cold season, they become languid, and then strike reluctantly, and frequently without any ill consequence."

The interesting case which I witnessed whilst a student in the University of New York, furnishes a striking proof of the speedy operation of the poison, even in the dead of winter.

Dr. W., of that city, was bitten on the hand, by a rattlesnake, sent to him by a friend from the State of Alabama. The hand soon began to swell, and in a few hours the whole arm was very much tumefied, presenting a mottled appearance, even to the shoulder and axilla. He had the best medical advice the city afforded, yet, after intense suffering for two or three days, he died.

I have no doubt, that if the *alcoholic treatment* had been instituted in this case, with the application of the ligature above the seat of affection,

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(which last was timely suggested by some of the Southern students present,) Dr. W. would have recovered.—*Southern Med. and Surg. Jour.*

On the Benefits that may be derived from placing Medical Substances on the Tongue instead of into the Stomach. By MR. WARDROP.— In a practical science like that of Medicine, an insulated fact often forms a connecting link with other facts that had appeared equally unimportant. The Medical observer does well to collect such facts, and it is one not of the least advantage of societies, that they stimulate members of the profession to record observations which might not have been deemed of sufficient importance to be brought before the public in any other channel. With such an impression, I venture, on the present occasion, to call the attention of my fellow-members to a subject which seems to be worthy of their consideration, and which has not hitherto, as far as I know, claimed much attention. There are many circumstances which might be mentioned, in order to show the influence which some medical substances have on the animal economy, when they are placed upon the surface of the tongue, these effects being caused by the absorption of the medicine, and its subsequent admixture with the mass of blood. Such phenomena are quite analogous to the effects produced by mercury or arsenic, whether these pass into the blood by the pulmonary, by the cutaneous, or by the absorbents of the alimentary canal. A gentleman, subject to what are usually called bilious headaches, had, during many years, seldom failed to obtain relief by taking sometimes two, and sometimes only one grain of calomel. He repeatedly found that there was a distinct difference in the length of time which the calomel took to relieve the headache, according as it was taken in the form of a powder put upon the tongue, or of a pill taken into the stomach. Another gentleman, who had for many years suffered from dyspepsia, and who, for some years before I saw him, was in the habit of regulating his bowels by taking a pill composed of a couple of grains of aloes with myrrh, accidentally discovered there was a remarkable difference in the effect of the pill when swallowed, or when allowed to dissolve in the mouth. When taken into the stomach, it always created a good deal of pain in the whole course of the alimentary canal, and the evacuations were irregular, both in number and in quantity; but when the pill was dissolved in the mouth, no other sensible effect was ever produced than one natural evacuation. Further experience convinced me of the difference in the efficacy of medicines placed upon the tongue, or taken into the stomach, and led me to inquire into the cause, and endeavor to explain so important a phenomenon. The structure of the tongue pointed out that it possesses an abundant supply of absorbents. "The spirituous parts," observes the illustrious Haller, "more especially of vegetables, are received either into the papillæ themselves, or into the absorbing villa of the tongue, as appears from the speedy renovation of strength by liquors of this kind, even when they are not taken into the stomach." This structure satisfactorily explains how medicinal bodies, when placed upon the tongue, are absorbed and carried directly, by the absorbent vessels of that organ, into the venous circulation; whereas, when the same sub-

stances are taken into the stomach, they are necessarily mixed with the food and juices contained in the alimentary canal, so that a more lengthened period must be required to separate them, and convey them by the absorbents into the thoracic duct, and thence into the venous system. Or they may pass unchanged, as has often been observed, out of the stomach, and in this unaltered state they are evacuated along with the excretions from the alimentary canal. This remarkable effect of medicines when placed upon the tongue, is strikingly illustrated in the administration of calomel, and it will be found that placing a very small quantity of it, say the sixth, or even the twelfth part of a grain, at short intervals, upon the tongue, such as every half hour, the mineral is rapidly absorbed, and ptyalism more quickly produced than by any other mode of employing the calomel. These results of medicines, I may also observe, are well known by the effects which croton-oil produces when applied to the tongue; and it is by no means improbable that the good effects of some medicines, when used in the form of lozenges, may be attributed to their absorption by the vessels of the tongue. All the circumstances regarding the difference and the effects of medicinal bodies, when conveyed to the venous system directly by the vessels of the tongue, or when they reach the blood by the more uncertain and circuitous course by the absorbents of the alimentary canal, appear to be worthy of being noticed, and may, it is not too much to hope, lead to some practical improvement in the mode of administering remedies. How far such differences will be found to result from exhibiting chloroform, the hydrocyanic acid, and the sulphates of quinine, iron, copper and zinc, in the form of lozenges, and the advantages of using these medicines in such a manner, well merits further inquiry.—*London Lancet.*

Hints on Opthalmia neo-natorum. By A. H. CENAS, M. D.—Purulent opthalmia of new-born infants is by no means an uncommon disease, and is most frequently met with in lying-in-hospitals. It is very serious in its results, and is the cause of more destruction of vision in infants, than any other form of opthalmia. Its origin is rather obscure, and whether it owes its existence to a specific *virus*, or to *atmospheric causes*, is a question still open. For my part, I believe in the influence of both; although the proportion of cases that I have been able to trace to specific vaginal discharges, is comparatively small.

The disease is of rapid formation, and often occurs immediately after birth, but usually, not before two or three days have elapsed. We then see a sudden and violent swelling of the eyelids with much redness, and an oozing of purulent matter from between the eyelids. The whole appearance is alarming, and an unpracticed individual would be persuaded that the eye was lost, and that nothing could be done.

But, in truth, there is no disease of the eye that can be more promptly and perfectly cured, and by the simplest treatment.

Formerly, great discrepancy prevailed in relation to its treatment. Some physicians recommending sedatives, others stimulants, others again depletion in the early stages, and afterwards astringents, purgatives, &c. The frequent failure, however, of these means, suggested the present plan, which is pretty generally adopted, and entirely successful when proper-

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ly carried out. It consists in the use of strong solutions of chrys. nit. argent, say 15 to 20 grains to an ounce of distilled water, and applied of this strength, at once, so soon as the disease is established. My practice is to have the purulent matter removed from the eyes with tepid water, and then instil a few drops of the solution four or five times daily, until the disease is removed. This is my only remedy, generally speaking, and under its influence I have seen the disease subside rapidly. On the second or third day, the infant is able to open its eyes, and the worst cases yield at the furthest in eight or ten days. When so protracted, however, I am in the habit of associating a constitutional with the local treatment, in the shape of one or two grains of hyd. cum creta, morning and night. The bowels are gently moved by this dose, and the disease rapidly mends.

Attention to cleanliness is essential, keeping the eye balls free from the purulent discharge, by washing the eyelids out with tepid water of flax seed tea, as often as the matter accumulates, is imperative. I have often observed that those mothers or nurses, that were careful in this particular, were most successful in their prompt removal of the disease. Another important precaution consists in the gradual withdrawal of the treatment, a sudden suspension of the solution, although the eyes seem well, may, and often is, followed by a relapse, and in a worse form than before. Some of the worst cases that I have seen, have been made so in this way.

I could cite some dozen of cases of the disease, occurring in my hospital and private practice, within the last five months, and treated in the above manner with uniform good results. But as they were all precisely alike in character and termination, I consider the details superfluous. —*N. O. Medical Register.*

American Medical Association.—The sixth annual meeting of this Association will be held in the city of New York, on Tuesday, May 3, 1853.

The secretaries of all societies and other bodies entitled to representation in the Association, are requested to forward to the undersigned correct lists of their respective delegations as soon as they may be appointed; and it is desired by the committee of arrangements that the appointments be made at as early a period as possible.

The following is an extract from Art. II. of the Constitution: "Each local Society shall have the privilege of sending to the Association one delegate for every ten of its regular members, and one for every additional fraction of more than half this number. The faculty of every regularly constituted Medical College or chartered school of medicine shall have the privilege of sending two delegates. The professional staff of every chartered or municipal hospital containing a hundred inmates or more, shall have the privilege of sending two delegates; and every other permanently organized medical institution of good standing shall have the privilege of sending one delegate."

EDWARD L. BEADLE,
One of the Secretaries, 42 Bleecker Street, New York.

☞ The Medical Press of the United States is respectfully requested to copy the foregoing.

TRANSACTIONS

OF THE

NEW JERSEY MEDICAL SOCIETY.

MINUTES OF THE 87TH ANNUAL MEETING.

The Eighty-seventh Anniversary of the Society, was held at Temperance Hall, in Trenton, January 25, 1853.

The President, Doctor Taylor, in the chair. The following is the roll of members—

OFFICERS.

President, -	O. H. TAYLOR.
First Vice President,	J. PAUL.
Second Vice President,	S. LILLY.
Third Vice President,	A. B. DAYTON.
Corresponding Secretary,	J. PARRISH,
Recording Secretary,	W. PIERSON.
Treasurer, -	J. S. ENGLISH,

Standing Committee.—G. P. REX, J. M. CORNELISON, E. FITHIAN.

Certificates were read and accepted from the following Districts.

Passaic.—G. Terhune.

Hudson.—J. M. Cornelison.

Morris.—H. P. Green, L. Condict, R. W. Stevenson.

Sussex.—A. Linn, F. Moran, F. Smith, and T. Ryerson.

Warren.—S. S. Clark.

Monmouth.—J. Vought, J. T. Woodhull, C. C. Blauvelt, R. W. Cooke.

Burlington.—Z. Read, W. L. Martin, S. W. Butler and F. Gauntt.

Mercer.—J. B. Coleman, J. Woolverton, J. McKelway and Geo. R. Robbins.

Camden.—J. M. Snowden, C. D. Hendry, S. Birdsell, and R. M. Cooper.

Hunterdon.—J. Lessy, J. Blane, W. F. Combs, and W. Johnson.

FELLOWS PRESENT.

Doctors L. Condict, J. W. Craig, W. D. McKissack, Z. Read, and S. H. Pennington.

Doctors Whitehead and Kent appeared as Delegates from Essex, but not having a certificate of delegation, were on motion admitted to seats.

The minutes of the preceding meeting were read and approved.

On motion, *Resolved*, That the President's Address be deferred till 2 o'clock, P. M.: and that an invitation be given to both Houses of the Legislature to be present.

The following Committees were appointed.

On Treasurer's Accounts, Doctors Butler, Rex, and Craig.

On Unfinished Business,—Doctors Pennington, Blauvelt and Cooper.

Nominating Committee.—Doctors Pennington, Terhune, L. Condict, Ryerson, Clark, Craig, Woodhull, Gauntt, Coleman, Cooper, Cornelison and Combs.

The Chairman of the Standing Committee submitted their Annual Report, which was accepted and filed.

The decease of Dr. Paul, one of the Vice Presidents of the Society, was announced by Dr. Coleman: and on motion, *Resolved*, That the Delegates of Mercer District be instructed to present resolutions in reference to the deceased.

The Committee on Unfinished Business, reported the several scientific subjects referred to respective Committees at the last meeting.

The Treasurer submitted a report which was accepted and referred to the Committee on Treasurer's Accounts.

Society adjourned to 2 o'clock, P. M.

On re-assembling, the President addressed the Society on the subject of "Relations of Popular Education with the progress of Empiricism."

The thanks of the Society were ordered, and a copy requested for publication.

On motion, *Resolved*, That the Recording Secretary be instructed to procure blank copies of Diplomas, according to the form in the By-Laws.

Dr. Robbins, in behalf of the Mercer Delegation, submitted the following Resolutions which were adopted: viz—

Resolved, That we have heard with deep regret of the death of our friend and professional brother, the First Vice President of our Society, Dr. James Paul, who has been, during his residence in this State, an active member of our Medical organizations, encouraging us by his learning and experience.

Resolved, That the foregoing Resolution be placed on record in the minutes of the Society; and that a copy of the same be sent with the respectful sympathies of the Society, to the family of the deceased.

The following bills were ordered to be paid.

O. H. Taylor, - - - - - - - -	$3 82
For use of Hall, - - - - - - - -	2 00
Scott's Bill for Stationery, - - - - - -	45

The Committee on Treasurer's Accounts reported, that they find the accounts and vouchers correct, and a cash balance in his hands of $359 14, besides Eight shares of Bank Stock of par value of $25 per share. Which report was accepted, and the following resolution submitted by the Committee, adopted: viz—

Resolved, That a distribution of $10 be made to each District Society represented.

The following Resolutions were offered by Dr. Pennington.

Resolved, That a Committee of Arrangements be annually appointed consisting of members of the District Medical Society for the County of Mercer, who shall procure a place for the Annual Meeting of this Society, and give seasonable notice thereof to the Recording Secretary, who shall publish the same in the New Jersey Medical Reporter, and in two newspapers, one circulating in the Eastern and the other in the Western section of the State.

Resolved, That the next Annual Meeting of the Society be held on the day designated by the By-Laws, at 7 o'clock, P. M., at the place selected for that purpose by the Committee of Arrangements.

Resolved, That the rules for the order of business be so amended, as that the first business, shall be the Address of the President.

Resolved, That the Recording Secretary invite the Executive Departments of the State Government, the Hon. the Legislature, such of the Superior Courts as may be in session, and the public generally, to be present at the delivery of the Address of the President.

Resolved, That in order to facilitate the organization of the Society, the Recording Secretary be directed to obtain the credentials, and make out the list of Delegates previous to the time of meeting, and that the District Medical Societies be requested to direct their Secretaries to render all necessary assistance to the Recording Secretary in the discharge of this duty.

The foregoing resolutions were adopted except the third, which, as it involves an alteration of the By-Laws, was referred to the next meeting for action.

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Dr. Ryerson submitted the following amendment of the By-Laws, viz:

Resolved, That chapter vii. section 9 of By-Laws be amended by adding the following proviso, viz:—"Provided, that a certificate of the employment of one year in the study of such branches of general science and learning as may have been designated by this Society, according to section 5 of the supplement to the act incorporating the New Jersey Medical Society, passed January 28th, 1830, and a Diploma from any regularly chartered Medical College, whose course of study corresponds with that of the Colleges now recognized by this Society, be deemed a sufficient certificate of study."

On motion, *Resolved*, That the Corresponding Secretary be requested to notify the several Secretaries of the District Societies, relative to the duty of sending up in due time to the Recording Secretary the several certificates of Delegation.

The Fellows present through Dr. L. Condict, recommended Prof. Geo. B. Wood, of the University of Pennsylvania, as an Honorary Member of this Society, whereupon he was unanimously elected.

The following preamble and resolutions were offered by Dr. Butler, in behalf of the Burlington District Medical Society.

Whereas, observation aided by scientific investigation, has demonstrated the fact that certain sanitary laws exist, the infraction of which are inimical to a perfect state of public and individual health, and *whereas*, the present sanitary laws and regulations of this State are inadequate to the purpose of effectually guarding against many of the preventable causes of disease and death; therefore

Resolved, That in the opinion of this Society the sanitary laws of this State need revision.

Resolved, That a Committee of three be appointed to take the subject into consideration, with the view of calling the attention of our Legislature to it at its next session; and report a plan for the purpose at the next meeting of this Society.

Resolved, That it be the duty of said Committee to meet for the purpose of conference, in the months of April, July and October, at such time and place as shall by them be agreed upon.

The resolutions were adopted, and the following appointed the Committee, viz:—Drs. Butler, Pennington, and J. B. Coleman.

The first, second, and fourth Scientific Committees made no report, and were continued.

The third Committee, by Dr. Coleman, submitted a report on the action of mercurial preparations on the living animal tissues.

The thanks of the Society were ordered, and a copy requested for publication. [See p. 231.]

The Committee of Arrangements were also appointed a Committee, in connection with Dr. Hopper, to watch against any attempts to repeal or alter our charter.

On motion, *Resolved*, That an additional sum of $60 be appropriated to the Medical Reporter the present year.

Dr. Alexander N. Dougherty was appointed Essayist.

The Society proceeded to the election of Officers—and the following were elected.

President, -	S. LILLY.
First Vice President,	A. B. DAYTON.
Second Vice President,	C. C. BLAUVELT.
Third Vice President,	A. LINN.
Corresponding Secretary,	J. PARRISH.
Recording Secretary,	W. PIERSON.
Treasurer, -	J. S. ENGLISH.

Standing Committee.—J. M. CORNELISON, S. L. CONDICT, and C. COOK.

CENSORS.

Passaic.—L. Burr, A. W. Rogers, G. Terhune, and F. S. Weller.

Essex.—W. Pierson, G. B. Chetwood, R. Kent, and A. N. Dougherty.

Morris.—J. B. Munn, J. C. Elmer, J. B. Johnes, and N. W. Condict.

Sussex.—F. Moran, J. L. Allen, A. D. Morford, and C. W. Moore.

Somerset.—R. S. Smith, H. H. Vanderveer, S. B. Martin, and W. D. McKissack.

Monmouth.—D. Polhemus, W. A. Newell, J. S. English, and E. Taylor.

Burlington.—B. H. Stratton, D. B. Trimble, J. J. Longstreet, and I. P. Coleman.

Mercer.—J. B. Coleman, G. R. Robbins, J. H. Phillips, and J. Woolverton.

Hunterdon.—J. Blane, G. P. Rex, A. S. Clark, and S. Lilly.

Warren.—R. Byington, L. C. Cook, J. Fitch, and J. D. Dewitt.

Camden.—I. S. Mulford, O. H. Taylor, C. D. Hendry, and A. D. Woodruff.

Gloucester.—J. R. Sickler, J. F. Garrison, J. C. Weatherby, and E. F. Clark.

Salem.—C. Hanna, C. Swing, Q. Gibbon, and T. J. Yarrow.

Cumberland.—W. Elmer, G. Tomlinson, E. C. Bateman, and J. W. Ludlam.

Hudson.—J. M. Cornelison, C. Cook, J. E. Culver, and T. R. Varick.

Delegates to the American Medical Association.—L. Condict, J. M. Cornelison, J. T. Woodhull, J. H. Phillips, D. B. Trimble, and F. Gauntt.

List of Licenses granted by O. H. Taylor, President.

NAME.	COUNTY.	
John Leavitt,	Warren,	Univ. City of New York.
Joseph T. Tenison,	Hunterdon,	" "
Joseph Moore,	Cumberland,	Jefferson Med. Coll.
Reuben Ludlam,	"	Univ. Penn'a.
Myles Synott,	Gloucester,	Jefferson Med. Coll.
William H. Worthington,	Burlington,	Univ. of Penn'a.
William L. Martin,	Chester, Pa.	Jefferson Med. Coll.
John A. Johnston,	Mercer,	Univ. of Penn'a.
Abner Woodward,	"	Jefferson Med. Coll.
Abraham Hopper,	Bergen,	Coll. Phys. and Surg. New York.
James J. Wright,	Burlington,	Jefferson Med. Coll.
Joseph H. Vondy,	Hudson,	Univ. of New York.
George W. Allen,	"	Jefferson Med. Coll.
John Thompson,	"	Univ. New York.
Andrew L. Cadmus,	"	"
John M. Julian,	"	Coll. Phys. and Surgs. N. York.
George T. Blake,	Hunterdon,	Univ. of New York.
B. Fullerton Miles,	Camden,	Jefferson Med. Coll.
Samuel C. Edmonds,	Atlantic,	"
William Wetherill,	Hunterdon,	"
Reynell Coates,	Camden,	Univ. of Penn'a.
Samuel C. Thornton, Jr.,	Burlington,	"
Ezra Mundy Hunt,	Middlesex,	Univ. of New York.
Ephraim Holmes,	Cumberland,	Jefferson Med Coll.
Samuel F. Fisler,	Gloucester,	"
John F. Grandin,	Hunterdon,	Univ. of Penn'a.
George Goodell,	Burlington,	"
Joshua B. Goodnough,	Monmouth,	Univ. of New York.
E. O. Dummer,	Bergen,	Jefferson Med. Coll.
Henry Morrill Stone,	Middlesex,	Univ. New York.
John Morgridge,	Cumberland,	Pennsylvania College.
John Kirby,	Salem,	Univ. Penn'a.

NAME.	COUNTY.	
John H. Janeway,	Middlesex,	Univ. Penn'a.
Jacob Elliott,	Essex,	Univ. New York.
John V. Menah,	Morris,	Univ. of New York.
Stephen Weeks,	Essex,	Univ. Penn'a.
William Bryan,	Burlington,	Penn'a. College.
Jonathan S. Whittier,	Salem,	Jefferson Med. Coll.
William Pierson, Jr.,	Essex,	Univ. New York.

Thirty-nine by Diploma and Certificate.

DIPLOMA BY CERTIFICATE OF THE BOARD OF CENSORS.

William B. Ribble,	Morris,
Ludwig Braun,	Essex,
Michael Moss,	Passaic,
Richard H. Page.	Burlington,
William H. Day,	Hudson,
Alfred S. Pettit,	Monmouth,
Henry Smith,	Hunterdon,
Joseph Cook,	Salem,

Eight by Certificate.

Society adjourned.

W. PIERSON, *Rec. Sec.*

ADDRESS.

Fellows and Members of the Medical Society of N. J.

GENTLEMEN—

By your favorable and perhaps too partial appreciation, it becomes once more my duty to address you officially, at this, our Anniversary assembling; and I trust, where all are so familiarly conversant with the thousand heterogeneous calls upon the time and attention of the medical practitioner, it will not be necessary to deprecate a severe judgment upon the style of my remarks.

"A fellow feeling makes us wondrous kind;" and if the subject matter of my discourse should meet with your approbation: if it should elicit some novel thought, and (which is more important) prompt us to novel actions, tending to increase the dignity of the medical profession, and advance the interests of the public, of which we are the servants, you will undoubtedly overlook mere faults of manner; for polished phrase and rhetorical ornament have seldom been promotive of the stern purposes of duty, or the harsh truths of science.

On a former occasion, I had the honor to offer for your consideration, some speculations on the improvement of medical instruction—a subject which for some years past, has attracted, and still continues to attract an unusual share of attention from the entire profession. I endeavoured to illustrate some of the duties of this Society, and its broad constituency, as a local portion of the associated profession of the whole country, in relation to this vitally important subject; and if these remarks, coupled with those of many co-labourers in the same field, have produced as yet, no practical result; let us hope that all the seeds of reform, scattered broadcast over the land, have not fallen on stony ground, but that the germs still sleep in a fertile soil await-

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ing only the maturity of time, and the summer sunshine of opportunity, to rise into the leaf, the flower, and the perfected fruit. The plough and the harrow vigorously employed, are essential to the luxuriance of the harvest, but a perpetual agitation of the ground may destroy what it is designed to foster. It is therefore not my intention at present to renew the subject.

There are numerous other questions not less closely interwoven with the public weal, which legitimately claim the attention of a scientific body, founded upon such authority, and destined to fulfil such functions, as the Medical Society of New Jersey.

By our existing charter, modified as it has been recently, so as to relieve us from a portion of our *responsibilities*, by allowing us to recognize the Diplomas of the best Collegiate Schools of the country, without subjecting the holders to additional examination, before admitting them to our fellowship, we are still not only the constituted guardians of the moral and the professional conduct of our fellow members, but also the legal protectors of the public health against the machinations of empirical pretenders, who with better knowledge do not hesitate to pursue a dishonorable trade, by practicing upon the credulity of the unenlightened.

But here again it is not my purpose to tax your patience with a subject upon which I dwelt in a former address, in considerable detail. For our apparent neglect of duty in not prosecuting, according to law, these transgressors upon the rights, the property, and lives of the citizens of New Jersey, we are really less to blame than we at first sight seem to be.

The honorable character of a liberal profession is appreciated only by the educated and enlightened portion of the community. The masses look upon the practice of medicine and the routine of ordinary trade, with equal eye; and the all powerful dollar, the true aim of the merchant, the farmer, and the mechanic, is regarded as almost the chief object of the physician.

The spirit of the Hippocratic oath, which, modified to meet the necessities of modern times, and the existing condition of society, still considered by ourselves, as binding upon every honorable member of our fraternity, is yet unknown to those beyond the pale.

What wonder then, that every effort we may make to repress an evil of such magnitude as the unlicensed tampering with human life, however disinterested that effort may be, is attributed by the ill judging crowd to a sinister and selfish motive—the establishment of a monopoly or trade? But while complaining of such gross injustice—while we lament that the path of duty can only be pursued under the taunts and misconceptions which are of all things most painful to a noble mind, are we sure that the evil is incurable?

No effort has been spared, it is true, to awaken legislative attention to the propriety of protecting the public health, by laws established to restrain the unwarrantable assaults of ignorance, but the result has rarely proved permanently fortunate, and even when momentarily useful, the good has been not unfrequently, more than compensated by a consequent weakening of that respect, with which practitioners of the divine art have ever been honored, perhaps to a greater extent among savage tribes and in benighted communities, than in the most civilized conditions of society.

For this mortifying fact, there must exist some adequate cause. Let us devote a moment to its investigation. The immediate cause of the evil seems obvious enough. We naturally seek it in the imperfection of the laws themselves, or the improper mode in which they have been executed. But the latter clause is included in the former, for the execution is determined by the statute. In the case before us, the execution of the laws against empiricism, is entrusted to ourselves; and we, as has been before observed, have found the attempt impracticable, except at a sacrifice of manly feeling, which even the community has scarcely the right to demand of any class of citizens.

Do we not then trace the impunity of unlicensed empiricism back to the inherent imperfection of the laws? But let us step one pace further in the train of causes. To what shall we attribute the existing imperfection of the laws for the regulation of medical practice? In answer, let me ask, by whom are these enactments made? By bodies of men, representing the mass of the community, from which we, when viewed professionally, stand forth more perfectly isolated than any other class. Our

science is recondite, "to the Jews a stumbling block, and to the Greeks foolishness." If a determining majority of legislators were competent to judge a medical question, if they were themselves conversant with the wants of a medical education, and the delicate rules of medical ethics, the moral propriety of which is perceivable only by the initiated, they would then constitute no improper representation of their great constituency.

Even the few legislators selected from our own ranks, have mostly relinquished the profession for another, and hardly compatible one, before a long course of practical acquaintance with one difficulty has rendered them suitable advocates in our defence, and even were they in all respects qualified for the task, their feeble voices would be last in the roar of the great army of those who look upon medicine as a mere trade, and would govern it by mercantile rules alone. Again, in these latter days, the ranks of empiricism outnumber those of the regular practice—they only are represented in the halls of legislation, and often wield their numerical power, far greater than our own. Would we wish it otherwise? I trust that no American would be willing to urge a single argument against those institutions to which we owe all our prosperity as a people, however he may regret the serious evils which are occasionally observable in the operations of the system.

Who would wish to expel the life-giving sun from the firmament, because his mid-summer arrows sometimes carry death in our midst, or because some spots abate the glory of his effulgent radiance. Even if we could succeed in removing this ignorance of our legislators upon subjects apart from the ordinary pursuits of men; even if the wisest of legal restraints upon empiricism could be enacted, and effectually executed at our suggestion, though human life might be for a time more certain, yet in the present state of society, we should ultimately fail in our purpose.

The enlightened masses, ever open to deception by pretenders, whose vaunted claims they are unable to test or deny, would soon be taught to regard us as monopolists and arbitrary rulers; and in a country, in which, happily, the popular voice is law, all such restraints would be removed, or new and incom-

patible enactments made, to the destruction of all order, so that the evils which we deprecate, would be enhanced instead of being lightened. Let us look across the water. In Pennsylvania, the regular graduate holds no legal privileges, and many empirical sects have acknowledged legal organizations—their institutions being endowed with corporate powers, secured by the same high authority that created the venerable University of that magnificent State. Is the profession, therefore, less respected in the land of Penn, than here in our own Commonwealth? Is it less efficient?

In Delaware, an Association, like our own, exerted for many years, a similar healthful influence within the pale of the profession. At length empiricism invaded the territory of our gallant little sister, and, somewhere about the year 1820, the Medical Society, through one of its fellows, induced the legislature to bestow upon it certain examining powers, and to render its fellowship or its diploma requisite to the legal practice of medicine within the State.

In small communities, changes of system are more easily and rapidly effected than in those of greater numerical strength, and the ultimate results of the grant of exclusive powers, to the regular members of the profession, in a country with democratic institutions, were demonstrated in Delaware more quickly than would have been possible in a larger State. Let us profit by her experience. The complaints and murmurs of the empirical practitioners excluded from legal rights by the grant just mentioned, rose loud and high almost upon the instant. The legislative ear was wearied by their unceasing expostulations, and but two or three years elapsed, before another act was passed, which struck a deadly blow to the dignity of the profession, and in a great degree destroyed the usefulness of the Medical Society, as a guardian of the public health.

The same immunities which were secured to the holders of diplomas from the most distinguished schools of the country, were extended by an express statute to those also who could produce diplomas from a Thomsonian College, and men who had devoted years to the duty of perfecting themselves in the knowledge of the multitude of sciences, which form the founda-

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tion of the art of healing, were forced into a species of unwilling fellowship, with the unenlightened pupils of a school founded upon no science at all, with men whose vision is limited to one kingdom of nature alone; who, in their reasonings, if reasonings they can properly be called, repudiate all generalizations, and whose practice is reduced to the rule of purely empirical dicta. A temporary calm, it is true, followed this strange action of the legislature of a truly enlightened State. The Medical Society struggled on, in the midst of the despondency resulting from this broad insult to its dignity, and the complaints against the exclusive privileges of the regular, and one branch of the irregular profession were confined to those stragglers from the great army of empiricism, whose members were yet insufficient to effect an organization under a collegiate head.

But it was not to be expected that quietude could permanently be established, while one division of irregulars were enfranchised to the exclusion of all others. Thomsonian Colleges were succeeded by Homœopathic Colleges, and, at a period a few years later, another law was passed, by which the immunities granted to the devotees of the vegetable system were extended also to the infinitesimalist. Indeed, this second proceeding was the inevitable consequence of its predecessor, for on no principle of justice, could legal advantages, accorded to those who scoff at all science, be refused to those, who at least profess to found their practice upon a theory, though the better instructed may denounce that so called theory, as the unsubstantial shade of an hypothesis.

The final effect of this wise legislation in Delaware, for the regulation of the practice of medicine, is this: The principle has been virtually established, that whenever any body of empirics shall succeed in obtaining corporate rights, as a medical school, through the philosophical ignorance of the law-makers in any State, the diploma of that school shall entitle the holder, to all the advantages conferred upon the regular practitioner, while the latter, in order to claim the most honorable position in his proper fraternity, must incur the expense, and submit to the restrictions consequent upon membership in the Medical Society, or the obtaining of its license—a tax upon learning and an immunity for ignorance.

These evils, gentlemen, have not fallen upon New Jersey, but let us candidly ask ourselves the reason. That like causes produce like effects, is an unalterable law of nature, and in due time, under the existing circumstances of society, this rigid exercise of our legal powers, in the suppression of the practice of ignorant pretenders to skill in our art, would lead in all probability to its legitimation by statute, here, as it did in Delaware. That this result has not already taken place, may be attributed perhaps as justly to our lenity in the exercise of our powers, as to the greater extent of our territory and the population, or to the superior wisdom of our rulers.

It is fair then to conclude, that, if we would operate effectively and according to the spirit and intention of our foundation, in protecting our own respectability, and the health and life of the community against the constantly increasing assaults of empiricism, we must essay some mode of action, other than immediate appeals to legislative bodies, which are unfitted to judge wisely of the necessity of the case, and on which the popular constituency is still less enlightened. Does it not appear reasonable then, that if we wish ultimately to correct the errors of medical legislation which cause such just complaint—if we wish finally to establish our professional rights, and elevate our craft to its proper position, as one of the most important classes of the community; we must begin by removing that unfortunate blindness of the masses, on all subjects relating to disease and Hygiene, which is the true source of these errors, and the general want of just appreciation under which we labor?

But how, it will be inquired, can this darkness be removed? At first sight, the difficulty of the question really appears insurmountable, but may not some of these difficulties originate in errors of our own? 'Tis true, we cannot indoctrinate the masses safely with correct medical theories. We cannot venture to argue before such an audience, the propriety of various plans of treatment of disease, and the relative merits of conflicting opinions in our science, from the fact that even our very language would be as unintelligible to our hearers, as the technicalities of a sailor to the landsman, whose footsteps never trod the deck of a vessel. There exists no pursuit to which the precept of an

eminent poet, "A little learning is a dangerous thing," is more applicable than to the practical department of our noble calling; and it would be folly to advise the general public "to drink deep or taste not" here, for so numerous are the ramifications—so vast is the extent and complication of our art, that the exclusive devotion of our time, and the occupancy of many years in study and close observation, are necessary to fit the novice for an entrance, even into the vestibule of the temple of Esculapius. But modern experience manifestly evinces, that the popular teaching of the first principles of the science of life is not only practicable, but highly useful. In many academies, and even primary schools, the outlines of physiology are now considered a necessary portion of the regular course of elementary instruction, and the application of sound physiological principles to the art of preserving health, and the development of mental powers has been the subject of numerous addresses to mixed audiences. These efforts have proved no less beneficial to the public, than conducive to the fame and the fortune of the pioneers in this department of instruction.

Drawing without stint upon the inexhaustible mines of nature, for the richest and most interesting illustrations upon the vegetable world, in its boundless variety of forms, from the lichen or scarcely visible conferva, to the cloud-piercing Californian pine, or the thousand trunked Indian Banian—upon the animal creation, from the jelly-like polype, with all its functions, equally diffused throughout its simple cellular body, to man, in all the fearful and mysterious complexity of his organization—the elements of physiology, when properly treated by a master-hand, possess the power of enhancing the popular attention of both youth and age, the lettered and unlettered, in a greater degree than those of any other science.

May not we find then, in the more general circulation of a knowledge of the first principles of life, a more available barrier against the progress of empiricism, than even the majesty of the law has yet been able to erect? May we not by enlightening the masses, the *constituency* of our political representation, pave the way for the election of legislators, who may wisely enact laws for the preservation of the public health? May we not

become the creators of an enlightened public opinion, which will support such laws above the contamination of ignorance and the assaults of unprincipled acquisitiveness? Or, failing in thus correcting the inherent imperfections of Medical and Hygienic laws, may we not at least fall back upon this newly enlightened public opinion, for protection against the evils of which we so justly complain?

By being made familiar with the extreme variety and delicacy of the machinery of life, and with the curious interlinkings of the numerous functions required for the accomplishment of what seems to the uninstructed, the simplest operations of vitality in health, the now uninformed public, would be taught duly to appreciate the grasp of mind, the profundity of study, and the keenness of tact, that are requisite to fit the medical philosopher to solve the simplest problems even in the theory of health. Would that public then consent to entrust the ignorant or half informed, with the power to tamper with the springs and wheels of God's master machine, the *human frame*, in the vastly more complex conditions resulting from disease, with its ten thousand aberrating sympathies? What man, the owner of a Cotton Mill or a watch, finding an error in the apparatus, threatening his mere personal interest, would appeal to the shoemaker or the merchant for its repair or regulation? What man, in doubt as to his eternal welfare, and confused by conflicting theological opinions, would fly to the practitioner at the bar, in order to unravel his doubt of conscience?

It cannot be supposed then, that a public properly enlightened on the subject of the laws of life, would continue to put confidence in men divested of preliminary education, drawn from the humbler walks of life, from the stable or work-shop, and after fifteen months or perhaps two years of partial study under one sided teachers, sent forth with a legal but ridiculous diploma, to practice on the lives and hearts of parents, children, husbands, and wives, on all the individual interests and domestic ties, which alone render life desirable in this sublunary scene of physical suffering.

Let us suppose some individual of inquiring mind, but unprofessional occupation, to have availed himself of an offered op-

portunity of attending a really philosophical course of popular lectures, upon the principles of physiology and hygiene, when the knife of the lecturer, acting perhaps on the body of some brute animal, in condescension to the natural aversion from human dissection, has laid bare before him, in one broad view, the almost infinite complexity of bones, muscles, nerves, vessels, viscera and tissues, and reacting to a common purpose in the most ordinary operations of daily life. When this inquirer finds that all his efforts, short of years of exertion, would fail to fix upon his memory the details involved in the performance of any general function; would he dare to trust the simplest external injury of any gravity, to the management of the natural bone-setter who becomes a surgeon by intuition? When taught that the severest pain in the head may result from a concealed irritation of the stomach—that the most dangerous fever may be merely a symptom of a pin-scratch on the toe, too slight to attract the attention of the patient, will he repose confidence in an arrogant sect who prescribe only for symptoms, and advocate the doctrine "similia similibus curantur." Even to suppose the possibility of such results, is to deny the impress of rationality, stamped by his Maker upon man.

I have always entertained the opinion, that it was possible for practitioners of our profession, by the natural effects of the habit of looking at the "res angusta domi," to become near sighted, as the over attentive school-boy does, when he robs himself of his natural rest, and devotes himself unceasingly to his wearying pages, in order to win the honor of some far distant prize. The "otium cum dignitate" of a professional old age, is the wisest as well as the most rational object of every one who wastes the energies of early and middle life, in the self-sacrificing and exhausting duties of our calling, and it behooves us to be careful in struggling too constantly, though with honorable feelings after this most desirable result, that we should not permit ourselves to overlook those opportunities of usefulness, which occur on either hand, though they may be at some little distance from our immediate path.

The members of a truly liberal profession should never for a moment forget, that to communicate knowledge, is to repay the

Gods. Who is there among us, that does not acknowledge the sentiment of Seneca?

"Si cum hac exceptione detur
Sapientia, ut reclusam teneam,
Nec enunciam rejiciam."

"If wisdom were given me, upon the condition that I should keep it to myself, and not proclaim it, I would reject it."

There is nothing in the nature of the subject, that renders the study of physiology unfit for a wise system of popular instruction. There is no danger that a little knowledge of this kind, would engender that rashness, which too commonly leads the half educated student of pathological hypothesis and therapeutical dogmas, to tamper with disease in his own case, upon the principle, that every man best understands his own constitution, or to thrust himself before the public, as a practitioner of the healing art, armed with a diploma from some institution miscalled scientific, whose professors, wise in their own experience, reject the experience of ages. The influence of the diffusion of physiological knowledge would be precisely the reverse of this, and it may well be doubted whether among the causes of the growth of empiricism in a country where all men read—where every cottage has its book shelves, there is one cause more prolific than the neglect of the science of healthful, living actions, even in the schools devoted to pathology.

The learned and far-seeing Dr. Benjamin Rush—one of the "fathers of American Medicine," was thoroughly imbued with the importance of the principles and policy which have just been indicated, and, carrying his views perhaps a little too far, most strenuously advocated the diffusion of a portion of practical medical knowledge, as well as hygienic theory among the people. He did so on the avowed principle, that such a course would be the most successful means of retarding the march of Quackery, which, if alarming in his day, is vastly more so now. His opinions on this subject, may be detected in his introductory lectures, which were addressed not exclusively to the medical class, but to mixed audiences, invited to be present at their public presentation, and we are informed that many of these lectures, were read in private circles for criticism, comment, and

suggested commendation, even before their delivery in the University. Many of those who enjoyed the happiness of a personal acquaintance with this truly great man, and who still remain among the living, retain a vivid recollection of his general advocacy of this policy, and his condescending efforts, safely to break *down* all unnecessary barriers between the medical profession and the great mass of society. It may be well questioned, whether the profession has not retrograded in opinion on this subject, since his death.

In the beautiful code of medical ethics, derived from the essay of the celebrated Dr. Percival, and modified to meet the requirements of this age and country, by the American Medical Association, (a code by the spirit of which, all regular and honorable practitioners acknowledge themselves morally and solemnly bound,)—we find most wisely condemned the sinister arts of those, who employ secresy, the advertisements of special pretension, or the preservation of patent or mercantile rights, in any thing relating to medical or surgical practice. We find also the courtesies due from one Physician to another, correctly established, and not only the duties which the profession owes to the public, but those which the public owes to the profession, stated and made the subject of comment; but we do not find any suggestions of the propriety of diffusing among the people, the knowledge that would render such sinister arts ineffectual, and such selfishness opprobrious with the masses. Of what avail is it, that we should address to ourselves grave commentaries on the respect and consideration, that the uninitiated owe to the practitioner of a liberal and dignified art? If we would influence the conduct of others towards us, surely, we should direct our reasonings to them, rather than to our brethren, to whom such disquisitions can bring no added light.

It is with all becoming modesty, that I venture these, perhaps, unpopular suggestions, but it does appear to me, that by drawing too distinctly the necessary lines which separate us as a body, from the great circle of our fellow citizens, we may lay ourselves open to misconstructions, and promote the evils of which we complain. And yet it must be confessed, that there is little use in dwelling upon mere generalities, in relation to this subject.

This discourse would be unworthy of your acceptance, and the time which it has occupied sadly misspent, were I not to attempt, at least, to give a somewhat utilitarian direction to the suggestions which have been thrown out. This then, I shall endeavor in a few words to do.

The wide diffusion of scientific and literary information throughout New England is proverbial, and (let me not be considered as making the remark invidiously), while that portion of the Union has contributed her full quota to the ranks of quackery in other States, her people thus enlightened, are less easily duped by ignorant pretenders at home.

This happy immunity, she owes, before all other things, to her admirable system of Lyceums. There is no city—there is scarcely a village in her broad domain, that cannot boast an institution of this character, in which throughout the long winter evenings, a series of weekly lectures is delivered.

These lectures are attended, not only by the male population of adult age and refined education, but by females and children, apprentices and factory girls. Side by side with wealth and fashion, sit the humble operative and modest domestic; acquiring by imitation and observation, habits of order and amenity of manners, while drinking in rich draughts of knowledge, be it from the more sparkling streams of polite literature, or the deeper currents of science, as they pour forth from the minds of some of the most talented thinkers of the age.

Till recently it is true, that History, Poetry and the Drama, have enjoyed too large a share of attention from the peripatetic teachers of the north, while the physical philosophy of life, has been too much slighted by the more learned lecturers of the day, and has been entrusted in many instances to incompetent hands, probably in consequence of this very disposition of which I venture to complain, the desire to retain all knowledge of the sciences collateral with medicine within the pale of the profession. Fortunately, however, this evil is now on the wane in New England.

The enthusiasm attendant upon the advent of M. Agassiz the accomplished Swiss naturalist, who was recently connected with Harvard University, has rendered popular, far deeper researches

into the arcana of nature, and now some of the most distinguished scholars of the day, are occasionally engaged in diffusing a knowledge of the laws of the animal economy, through the medium of Lyceum Lectures.

If then, under such unfavorable circumstances, this mode of furnishing proper mental aliment to the youth of the Northern States, was found effective, not only in restraining the vices resulting from the absence of rational amusement, at an age when mental inactivity is utterly impossible, but also in limiting the domain of empiricism, by the enlightenment of its victims—much more may we anticipate from the novel impetus given to the study of nature, during the last few years.

And why should these advantages of the Lyceum system be confined to the New England States? Is New Jersey too poor to imitate their laudable example? It is true, that a few of our larger towns may boast of institutions similar in name and perhaps somewhat analogous in purpose; but even in these, there is a radical defect of system, destructive of their usefulness.

The funds of the midland or Southern Lyceums are devoted exclusively to the maintenance of a library, a hall, and perhaps a cabinet of curiosities. Not a dollar of the income, is usually devoted to the remuneration of that talent which is selected for the purposes of public instruction within its walls. The honor of addressing a few hundred individuals, is the bribe held out to induce some men of intellectual distinction, to travel perhaps at their own expense, it may be, from some far distant city, to lecture at a small provincial town.

But let us suppose that public spirit and disinterested desire for usefulness should sometimes lead able men to make the necessary sacrifice, and devote a portion of their leisure to the enlightenment of their benighted fellow citizens, in this manner. It should be remembered that men of science are proverbially poor —the very nature of their studies compelling them to be so. Is it then to be supposed that such will sacrifice sufficient time and gratuitously meet the expense of necessary illustrations, for a course sufficiently extensive to develope the elements of any branch of human learning, in a practical and useful manner?

Our Lyceum courses are composed of a series of disconnected

lectures on the most heterogeneous subjects, from which little practical and no scientific knowledge can be acquired. The History of Greece—the Philosophy of Life,—the Nature of Things—the Value of Education,—and a thousand other generalities, each wide enough to require for its proper elucidation a month of time, are seized upon as subjects for discourses of an hour, and the orator, cut off from the possibility of teaching, must content himself with a mere personal display of elocution to the amusement of an audience, that quits the Hall, with perhaps a lively impression of the grace or awkwardness of the speaker—but a most dream-like and misty conception of his theme. Our eastern neighbors are wiser—with them a portion of the income of Lyceums is invariably appropriated to the payment of a consideration to the lecturer—which he must receive, before he is permitted to leave the apartment. No matter how humble the offering be, (and it varies in different towns from five to twenty, and even thirty dollars) it is not material how wealthy the recipient, it cannot be declined without offence. A refusal is met by one or two retorts, either the objector is politely reminded that he has no legitimate right, to force upon the public an obligation, under which that public does not wish to rest, or he is told, and sometimes with much feeling, that the accident of fortune does not warrant the wealthy, in bringing a blush to the cheeks of talent perhaps quite as useful, though less happily endowed with means, by giving to the payment of a just debt, the air of gratuity.

Two noble results follow from this custom in New England on the principal that whatever is paid for is prized. Her audiences are vastly more attentive, than those which are addressed gratuitously; and on the principle that labor duly compensated, is usually well done, the quality of the discourses and their practical usefulness is astonishingly enhanced. Subjects that require time for their proper elucidation, are much more fully discussed, and connected courses embracing many lectures by the same individual, before popular and village audiences, are of common occurrence.

Small as is the compensation given for each course, its consentaneous delivery, in each of four or five adjacent towns, ren-

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ders the total remuneration sufficient to the end in view, and many admirable scholars, in the eastern States habitually realize a competency, mainly by the most useful process of peripatetic teaching.

The formation of a similar system for our State, is surely not beneath the contemplation of this Society, and would prove in its hands and under its patronage, not only a powerful lever for the moral advancement of the community, but, if rightly directed to the spreading of a knowledge of physiological truth, a most efficient means of curtailing the practice of empiricism, and elevating the popular estimate of the dignity of the profession.

By railroads and other facilities of recent date, most of our smaller towns and villages are drawn into close communication in point of time and easy transport. Most of them are provided with Halls for the use of societies, and fixtures adapted to the business of lecturing, available for public purposes at a very reasonable rate, so that, there is no town of a thousand inhabitants that could not conveniently afford such a subscription, as would yield five or even ten dollars for each, of twelve lectures, which would constitute a weekly course during three months, when business is at a stand and the public are anxious for mental improvement.

Let the people of any neighborhood be once convinced, that knowledge of real and practical utility could thus be economically obtained, in place of the display and idle verbiage too frequently offered them, under the present system, and their willingness to move in the matter, would undoubtedly be found fully equal to their obvious ability.

And, members of the Medical Society, shall we not—are we not in duty bound to be up and doing in this really important work? Each of us, in his proper sphere, possesses an influence sufficient for the initiative step. Within our own pale, there is adequate energy and talent to carry it out to a happy and most useful issue. Let us devote some thought to the question, and, after examining the premises, resolve to act. Assuredly if we succeed, we shall win from a grateful public the acknowledgment of important services, and even in case of failure, we shall be

cheered with the consciousness of having deserved its thanks.

But there is yet another and a parallel mode, in which this Society may promote its own just reputation, and advance, to an incalculable extent, the diffusion of knowledge, while struggling for the suppression of empiricism and its consequent evils. Our vision need not be restricted to the present generation. Corporations are not limited like individuals, to a life of three score and ten. They endure through after ages and may legitimately look to the interests of our yet unborn successors. If, by the regulation of Lyceums we can remove in some degree the errors of ignorance among the people of the present day, through the influence of the common school, we may act upon the people of to-morrow. By arming our youth with a rational knowledge of the philosophy of life, we purify the very foundations of intelligence and precipitate those adulterations, on which the destructive animalculæ of empiricism depend for their support.

Physiological studies have gradually been forced to a certain extent, into the school systems of other States, but no where, so far as I am informed, has the medical profession as a body, exerted its legitimate influence, in the regulation of popular instruction. If it be right to employ our aid and powers in favor of Lyceums, it cannot be less so, to attempt a reform in this direction also.

Now, New Jersey stands unenviably distinguished among her sisters, by the total absence of well regulated public schools, under the direction of her Legislature. The small fund which she annually appropriates in aid of the voluntary taxation of the local districts for the purposes of education, bears no proportion either to the wealth or population of the State, when compared with those by which she is surrounded. The isolated and ill-regulated efforts of her citizens in this direction are divested of all unity and approach to system.

How small an exertion on the part of this Society, during the last session of her Assembly, would have removed the blot from her escutcheon, and would have supplied the means, at least, if not the wisdom of arrangement necessary to effect a thorough reformation. A proposition to appropriate to the School Fund

of the State, the income tax on roads (a fund amounting now to nearly one hundred and thirty thousand dollars, and constantly increasing), is said to have been lost in the Senate by a single vote. Cannot a Medical Society, in which so much State pride is felt, determine a *single vote* among the conscript fathers? One effort—one little struggle—and the victory would be won.

But it is not sufficient that we should advocate the appropriation of adequate means. We should also take an interest in the law by which the application of these means may be determined. To be effective, the School System must be rendered uniform in principle throughout our territory, without attempting to make a railroad of the human mind, and to bind every child in the commonwealth to one routine of study, and one set of class books after the Austrian mode; each should be thoroughly instructed in the elements of those practical sciences, which have direct relation to the duties of American citizen, whether economical, political, social, or moral, while the refinements of classical and polite knowledge, so ameliorating and humanizing in their influence, should not be neglected. They should be subordinate to the more immediate claims of pure utility, instead of being made to appear, as they usually are, the end and purpose, rather than the ornament of a genuine education. Among the truly useful sciences, none are more appropriate—none are more indispensable in a wise system of public instruction, than physiology and the kindred subjects of Hygiene. It is our duty to see that their claims are duly recognized and effectually defended.

But no such uniform system is practicable unless the machinery be under the direction of some competent individual head. It cannot be established by the disconnected efforts of scattered townships, but should be regulated by a general law, and placed under the jurisdiction of an able Secretary of Instruction, whose arduous duties should receive a reasonable compensation.

And now, having fulfilled the task allotted, in a manner which at first glance, may not appear so technical and exclusively professional, as the occasion might seem to require; allow me in self defence, to remind our fellow citizens, who, as invited guests, may have honored this somewhat dull address with a

patient hearing, that this Society, being a creature of the law, with legal purposes, has other duties to perform than those which relate directly to the science upon which rests the art of healing. Its obligations to the community extend, to collateral as well as immediate measures, that are connected with the preservation of the public health, and it would be severely censurable were it to rest satisfied with a near-sighted view of its responsibilities; confining its attention exclusively to those affairs which immediately affect the purse of the individual honor of its members.

The soldier on the field of battle—the clergymen in the pulpit—the lawyer at the bar, does not lose the character of the private citizen, in assuming a position that isolated him from the mass as a constituent of a peculiar class; and why should the medical practitioner be more widely removed from the broad fellowship of his kind? On questions of constitutional importance—the bar, as a body proper exerts a permanent influence. Wisely the clergy of all denominations participate in every public measure designed for the purification of the morals of society; urging by the combined force of their character and energy, the measures which they deem most essential to the well-being of the human soul, even in the forum and before the conscript fathers.

Why then should not the corporate faculty of our peculiar art be felt in legislative halls, when questions arise that affect the very organization of the human frame, the structure and functional power of that mysterious engine, by which the soul of man is brought into relation with external things? While the law deals with the purse, the capital of the vast workshop of Society, and regulates the application of its labour, while religion prescribes the moral duties of the swarming operatives, and gently bends the multiform results to the honor and the dignity of the divine architect owner—to medicine belongs the task of keeping the machine in order, and of directing the repairs, without which all would be confusion, crash and terrible explosions.

"Mens sana in corpore sano," is an adage as ancient as it is true, and as the want of proper mental culture, whether in early

childhood, when the brain is forming, or in adult age, when time is wearing its wheels, must weaken or destroy the regular movements of the most complex apparatus; to us belongs the paramount necessity of the guardianship of that education, which forms the human mind. Without our aid—without a diffusion of the knowledge of the physiological laws of life, the lever by which religion carries out the great ends of existence, cannot fulfil the proper functions, nor all the wisdom of the law prevent the overthrow of order among the teeming millions of ill-directed agents.

And now in conclusion, let me deprecate all possible censure from those, who perchance may be present, and whose duty it is to make laws for our highly favored State. We thank them for their patient and long enduring courtesy, in listening to a discourse, which in its very nature precludes all eloquence. One in which oratorical ornament would have been impertinent, as calling off attention from the practical and serious bearing of the subject.

It has been no part of our design to encroach, in the least degree upon their proper province, but as a citizen of that free and happy country, in which the humblest voter is a portion of the sovereignty, I have but endeavored to direct the attention of a somewhat exclusive class, to the objects of duty and circles of legitimate exertion in a wider and more general interest.

And to you, gentlemen of the New Jersey Medical Society, let me apologise for any disappointment you may feel, in the selection on this occasion of a subject, so foreign from the usual routine of our annual addresses.

If from the suggestions now thrown out, you should be induced first to reflect and then to act upon the great questions thus crudely stated, I am convinced, that even the more immediate results would cheer you with the consciousness of having acted well. You will have stricken a *blow* at the *root* of empiricism, instead of idly lopping off the topmost branches of a tree, that bourgeons faster than we with all our axes, are able to curtail it. And in this honorable struggle you will no longer meet the opprobrium, or the suspicion of interested motives, that has ever followed our previous attempts. Here, the community goes

with you, not against you, and all now present, be they guests or members, with thousands beyond this hall, moved by our influence—thousands in future years, will bless the day, when the embodied medical profession of New Jersey, stepping forth from its beaten path, shall erect the banner of popular education, and without transcending its legitimate powers, shall awaken to the full perception of the beauty of that noble saying of Terence—

"Homo sum, et humani, nihil a me alienum puto."

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REPORT OF STANDING COMMITTEE.

In Chapter II, Section 7 of the By-Laws of the State Medical Society, it is made the duty of the Standing Committee, "at every anniversary meeting to report the general state of health of the citizens of New Jersey, during the preceding year, the causes, nature, and cure of epidemics (if any have prevailed,) in any part of the State, curious medical facts, discoveries, and remarkable cases that may have come to their knowledge." "And that these several objects may be promoted, it shall be the duty of each of the several District Medical Societies, at its annual meeting, to appoint one of the members as a reporter, who shall be required to furnish the Standing Committee, on or before the first day of January of every year, with all the information which may present relative to these subjects, within the bounds of the District Society to which he belongs." There are fourteen District Societies in the State of New Jersey, from none of which have any reports been received. Your committee therefore infer, that the citizens of our State have enjoyed an unusual degree of their wonted health, during the past year. Our immediate predecessors received reports from seven Counties, which formed the basis of their Report. It was the intention of your present Committee to have pursued the same course, and they have waited in expectation of receiving the county reports, until it was too late to offer any extended observations of their own. They have no knowledge of any epidemics that may have existed in our State, neither have any curious medical facts, discoveries, or remarkable cures, come to their knowledge, nor have any irregularities, neglect or contempt of the rules and regulations of the Medical Society been reported to them, consequently their Report must be entirely barren of the objects of their appointment.

Your Committee are of the opinion that the plan of appointing district reporters to report to the Standing Committee, has not answered the expectations of those who suggested it, from the fact of the carelessness or remissness of duty, that exists in regard to it. The District Societies have either neglected to appoint their reporter, or the reporters have failed in the discharge of their duty.

Your Committee would suggest the following alteration. Let each reporter when appointed be ex-officio a member of the Medical Society of New Jersey, let it be expected of him that he will faithfully report everything relative to the objects of his appointment within his county, and it will be expected of him, at the annual meeting of the State Society to read his report. This plan has been adopted by other State Societies, and operates well. Your Committee believe that this plan would insure full reports from all our District Societies, and would greatly add to the interest of our annual meetings. Besides, we should then obtain a knowledge of epidemics, their causes and cure, and the best interests of humanity, the object of the medical profession, would be greatly subserved thereby.

Your Committee would also suggest, that hereafter the Standing Committee be appointed, so that its members shall all reside in one county, or at least so near each other, that they can meet as often as may be necessary to fulfil the duties of their appointment; as it is at present, it is impracticable, from the fact of the members living so remote from each other, for the committee to have a meeting and consult how their duties may best be discharged. The labors of the committee would be comparatively easy, did they reside near each other.

Epidemics have doubtless occurred in some localities during the past year, a faithful history of which would prove valuable to the profession and beneficial to the community at large.

The Standing Committee of last year referred to the report from Gloucester, "of the prevalence in that locality of a disposition to purulent deposits in the external tissues of the body." Since that time, this disposition has spread, and now exists in an epidemic form in many parts of the State of New Jersey. It is believed to be increasing, and although apparently a mild disease, evidences of its fatality in some some instances are not wanting, yet it is worthy of notice from its extensive prevalence; and "what is most singular it appears to have broken out in the four quarters of the globe at one and the same time, and to have been influenced in its rise and progress by one universal cause."

Thomas Hunt, F. R. C. S., Surgeon to the Western Dispensary for diseases of the Skin, has published in several late numbers of the London Lancet, a very interesting series of papers "on Carbuncles and Boils with especial reference to their prevalence as an Epidemic." These papers contain all the necessary information relative to the history, pathology, and treatment of the epidemic, and are well worthy of being read by the

profession. Your committee are not aware, that any other general epidemic has been prevalent since our last meeting.

The Committee would notice, with feelings of regret, the decease of our first Vice President, Dr. James Paul. In this visitation of Providence the Society has lost one of its valued members; one who felt a deep interest in its prosperity, and who contributed largely of his personal efforts to promote its success; and it is due to his memory, that some suitable tribute of respect be paid by this Society in remembrance of his moral excellencies and scientific attainments.

We have reason to believe that there is still an increasing interest, in most of our District Societies, the attendance at their meetings is generally large; and they are becoming more useful to the profession, from the fact that their primary object is now an interchange of professional experience and observation. The course of medicine in our State is onward, and the profession generally keep pace with its progress, and no means is more successful in accomplishing this result, than a well organized District Society.

The Committee notice with pleasure, the effort being made to establish a Medical Institute at Burlington, and we are of the opinion, that if the effort is successful, it will do much to elevate the character and standing of the medical profession of New Jersey. From the known reputation of most of the gentlemen engaged in the enterprise, we would commend it to the profession as worthy their patronage and support. We would also unite in the recommendation of several preceding Committees, on the importance of medical men extending their patronage and support to the New Jersey Medical Reporter. As that journal is at present conducted, it is a credit to our State, and if the profession of New Jersey would countenance and support the Reporter, as they ought, we should then have a journal that would compare favorably with any other—at present published monthly, at the same terms—in this country. It is therefore hoped, that the medical men of this State will see their true interest, and extend to this Periodical that support of which it is worthy.

GEORGE P. REX,

JANUARY, 1853. *Chairman of Standing Com.*

REPORT

ON THE EFFECTS OF MERCURIAL PREPARATIONS ON THE LIVING ANIMAL TISSUES: READ BY JAMES B. COLEMAN, M. D., Chairman of Committee.

Animal formations being composed ultimately, of specific organized arrangements, these arrangements must be regarded in determining diseased as well as healthy action.

The composition, or chemical elements of these formations, hold specific relations to the agents taken into the circulation.

Substances acknowledged as remedies in disease, are safe or dangerous, according to their chemical constitution.

Mercury has never been properly regarded in its chemical action upon the ultimate structures.

To investigate the action of mercurial preparations upon the living animal tissues, we must be governed by the foregoing propositions. We must begin with the organic rudiments, and trace the formations through their various phases of development. The molecules, their chemical elements, and their vital affinities, are the points to be considered; for with living, as with dead matter, changes in composition take place only between atoms.

The nitrogenous compounds constitute a group of formative principles. They embrace nerve, muscle, glandular matter, and the soft tissues generally. The carbonaceous and earthy compounds, including fatty matter and bone, proceeding indirectly from the action of the nitrogenous group, do not immediately concern this investigation. It is in the nitrogenous group that we see the extreme point of organization. This, in the embryo, is a cell, composed of membrane, surrounding a fluid, containing a nucleus. When observed separately, there are but few marks to determine whether it be of vegetable or animal origin, or what part it is to fill in the myriad groups of organized existences. Yet in that cell there is some force which determines the character of the individual to which it belongs, and not only the individual, but the specific organ in which it is to be deposited. By an effort peculiar to each cell, it selects elements of its kind from the fluids of circulation, and arranges a structure that soon appears in some of the acknowledged forms of organized tissue. In whatever way we regard the cell influence, in the changes from the embryonic state, to the perfect maturity of the individual, the fact cannot

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be doubted, that the cell nucleus, its nitrogenous centre of vitality, its predetermining formative principle, still exists, whether surrounded by a fluid, as in the soft rudimental stage of the embryo, or the indurated tissues of the adult. It is reasonable to believe that it is at this point many diseases begin, which show themselves afterwards by violent symptoms in the more obvious structures. To suppose the contrary is to disavow the chemistry of life. If there be sufficient force in these molecules to form the young, and if it be from them alone, that the matured perfect animal has been constructed, and by them that he is continued, exhibiting all the phenomena of vitality, we cannot regard their derangement as unimportant in correct pathology.

The formative cell, or ultimate molecule, is derived from the blood, in which its proximate elements exist, with other combinations of organic compounds. These organic elements, in a healthy and properly nourished animal, are favorable to its proper affinities, and final arrangement. It is the uninterrupted play of these affinities of the ultimate molecules, that produces healthy tissue, and it is again, the influence of these tissues upon each other, arranging the organs and their appendages, which constitutes a perfect being, exhibiting all the varied phenomena of organized existence. The organizing influence first seen in the cell, may be vitiated by the fluids of circulation when they contain disorganizing chemical agents. The extreme sensitiveness, which enables them to select, with a vital discrimination, elements essential to their further development, is blunted and destroyed. Some may suffer more than others, according to their more delicate combination of elements, and such tissues as are formed by them, may be most easily affected by the foreign bodies in the circulation. The organizing molecule may be indirectly deranged and destroyed, by alterations of the grosser structures, such as are affected by mechanical violence, or other causes that have power to change the anatomical relations of tissues.

All organic derangements, attended by a changed condition of the functions of an organ, are more open to the observation of the physician, than those which interfere with the formative elements. From the extent of the phenomena they exhibit, they offer more for treatment. Reacting upon associated parts, and deranging their forces, whatever remedy experience has proved to have power to depress exalted, or stimulate depressed action in any organ, is resorted to, as one or the other condition prevails. This frequently answers the end—functions seem to resume their natural condition, and the patient is, afterward, apparently well. Whether the treatment has been that which a correct discrimi-

nation would have adopted, remains questionable. The result does not prove its propriety. There are powers of life, beyond the temporary interference of remedies, that will remove obstructions and heal lesions. It is unnecessary, in an article of this kind, to refer to familiar illustrations.

Gross mechanical obstructions, such as indigestible substances in the alimentary canal—obstructions of the bile tubes—strictures—deposits in the urinary bladder—tumors—distensions by serum, all these necessarily derange the vital forces, and they can frequently be removed with entire certainty, and the diseased condition disappears with their removal. Such remedies as produce these effects, are certainly not to be classed with those agents which operate more obscurely upon the organisms, and which, from their known interference with the ordinary forces of life, are called alterative, and among which mercury stands first. A common cathartic dose operates as a foreign body, irritating the stomach and bowels so as to discharge their contents. Different agents, producing these effects, have their individual kinds and degrees of irritation. Urinary deposits, either acid or earthy, are dissolved by agents carried through the circulation, or are removed by the surgeon; tumors may be destroyed in various ways: accumulations of fluid can be discharged by tapping, and thus with many other of the obvious obstructions of the system. But those states dependent on affections of the formative cells, in which the elementary tissues are the first to exhibit pathognomonic symptoms, having nothing more than an exalted or depressed state of the vital forces, to mark a departure from health, and certain sympathies of the most sensitive organs to respond to their changed condition, being too obscure to admit of a correct diagnosis in the present state of pathological knowledge, must, if treated in any other manner than the instincts of the individual direct, be experimental and hazardous. Who can tell, in many of the species of fever, the original movement? On that movement depends all correct reasoning, and fair treatment. The disturbances that follow in the train of the original morbid action, are certainly not the phenomena that call for attention, it is something beyond these that must be controlled. It is not because these consequent disturbances are more easily observed, that they are more inimical to life. Pain may subside, parts may become accustomed to the pressure of foreign bodies and morbid enlargements, vicarious offices may be performed by organs to relieve the system of elements that have been obstructed in their proper outlets; all these states may exist to a considerable extent, and the animal recover, finally, with a tolerable degree of health. But if the organizing action is arrested in any of the vital tissues, complete destruction of the in-

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dividual must follow, if it be not soon relieved. If the encephaloid molecules are vitiated, we observe a prostration of vital forces. Nothing is violent, all tends to a gradual destruction of the organisms. In these cases, we support, we stimulate, we try in a variety of ways to infuse into the languid system, the principle of life. Alcohol, tonics, frictions, artificial temperature, inhalations, the imponderable elements are applied in their turn, and if, after all, the patient struggle through his distemper, nothing that art has used, can be satisfactorily determined as the individual certainty, the agent that has, by any known law of nature, acted positively upon the disturbing influence. True science reviews the case, and declares, in the honesty that is ever its great characteristic, that organic nature, in its struggle for life, has not been thwarted; that warmth and air, and food, and rest, have been regarded, and that every opportunity has been allowed for the curative tendencies to exert themselves to the uttermost. If, on the other hand, an undue quantity and activity of the medullary molecules exist, exalted action prevails, and all the phenomena of life are in excess, we fear a rapid wearing out and breaking down of the system, we then resort to such means as will destroy life. We bleed, we chill, we set the emunctories at work. The kidneys, the liver, the alimentary canal, and the skin, are thrown into violent action, to bring down the morbid symptoms. We even make direct attacks upon the heart, by agents that paralyze its movements, so that the vital current, after it has been reduced in quantity, may be retarded in its motion. What is the cause of this exalted action? Where is it? What are we doing when we blindly attack organs that are healthy, as far as they are related to the primitive affection? The patients recover, as recover they will under the most contradictory treatment. Have we met the requirement? Do we know why we administered, and what we were battling? The chemist, the microscopist, and the physiologist must determine, and if from them we do not obtain the information we seek, practice must be empirical.

That elements and compounds are administered, and taken into the circulation, which are not nutritive, and against which the instincts revolt, is well known. By the way of the stomach, and by application to the surface, and even by inhalation, various agents are administered, with the view of changing some morbid action. Some of these agents change chemically the organic principles, coagulate albumen, dissolve fibrine, and indurate medullary matter. Others suspend decarbonization, and even destroy the nervous phenomena. Arsenic, mercury, antimony, bismuth, copper, zinc, and lead, with iodine to assist in their energy, are as

freely given as if we were operating in a laboratory, with the scale of equivalents before us, the test glass in one hand, and the reagent in the other, upon a mass, the composition of which was perfectly known. Now, agents which are inimical to life, recognized as such by the protective instincts of the animal, proved to be such by common observation, and demonstrated such by the organic chemist, should be most accurately reasoned upon, and carefully administered. The inquiry should be, if to allay a disordered function, we administer arsenic, do we control that function, and no more. If we prevent a recurrence, if an intermittent, (what is an intermittent?) do we not produce disorganization of albuminous formations, and by establishing a commotion among the elements of vitality, so far diminish that force which is necessary to an intermittent fever, that there is in reality, not vital power sufficient for this comparatively safe disorder. Whence the puffed semi-transparent prostrated condition of the arsenic taker? Can any one determine the important changes that have been made in the ultimate molecular structures by this mineral, or at what period of the life of the individual he will have entirely recovered from its effects, or what its influence may be upon his progeny?

In civilized life, a man may be apparently well. He will be without pain, sleep easily, take a moderate share of food, and attend to some kind of business that taxes but lightly his physical powers. He will pass as a healthy, although delicate man. Yet the life of this individual is sustained by constant watching. Very great regularity in exercise, diet, temperature, and even mental exertion, are conditions carefully guarded, and it is when there is a departure from this monotonous routine, that the whole organization seems too feeble to overcome the accidents of manly life. Such an individual is not well. Either disease, or bad treatment, or the imperfections of his parents, have vitiated tissues, and made his life a struggle, in which the vital forces barely hold the mastery. He has none of that excess of power which impels the scout, coarsely fed, and half clothed, through floods, and over deserts, with a velocity and endurance scarcely equalled by the reindeer. This vigor of the scout, is the healthy condition of man. His every structure is made to brave such perils, and accomplish such feats. He has within him, compensations for hot and cold, wet and dry; he has apparatus for motion, unsurpassed for variety and endurance, by any other animal. When we see so many entire families, so imperfectly organized, so deficient in physical strength, we are to impute the variation from the perfect man, to imperfection in the parent. An imperfection sufficient to impress organic deficiency

upon the child, must be a changed organism, a condition that propagates according to some new type.

The question now arises, how far the recuperative power of the organs can overcome the effects of agents that have power, when administered in excess, to destroy them. Many of the vegetable poisons destroy life, not by chemical solution, or induration of organic compounds, but by some peculiar action upon the nerves. These poisons are compounds of oxygen, carbon, hydrogen, and nitrogen, and the peculiar atomic arrangement, as to quantities, is all that distinguishes a poison from a vegetable nutritive compound. The combination is so slight that they are readily decomposed. If they do not destroy life instantly, they are generally harmless. It is such poisons as ulcerate, and dissolve the animal formations, or such as enter into combination with them, and make inorganic insoluble products, that tell most fatally upon the system, in doses that do not immediately destroy life. These are the substances that are denominated alterative, for they, if perseveringly administered, will gradually break up some organic action, and produce a train of sympathies so different from the manifestations of the previous condition, that the living phenomena are certainly changed. Sometimes a diseased action is converted to one of apparent health, and the patient recovers—sometimes the reverse, and he is hurried out of existence more rapidly.

If an agent have been introduced into the system that has acted as an alterative, how far has it deranged the elementary structures, and made them incapable of performing, afterwards, their perfect functions? It is true, this is a difficult point to determine. We know that the oxide of lead will produce incurable disease of the alimentary canal, and palsy—phosporous disease of the bones—mercury sloughs of the albuminous structures, and osseous disorganization. After a tissue has been so far changed in its integral arrangement, as to present to the eye a different structure, it cannot perform its function as was originally intended, and in proportion to this change, it affects associated tissues. Parts depending upon these new formations cannot be considered healthy, nor can their action be as perfect as if no change of the kind had taken place. The nerve function is not as strong, nor enduring, in one who has suffered from cerebral concussion, phrenitis, palsy or apoplexy—the æeration of the blood as thorough after pneumonia or pleuritic adhesions—the action of the liver is vitiated by structural changes, such as engorgements, abscesses, and cicatrization—the bones are not as strong, as well shaped, and as nicely adjusted to their offices, in one who has suffered from necrosis. All these, and similar diseases, leave their evidence after the patient has ceased to complain of their particular symtomatic annoyance.

As certainly as a cicatrix shows the track of the scalpel, the organic lesion of tissues which attend many diseases, and the action of many remedies, leaves its mark for life.

If it be conceded that the recuperative powers of the system be sufficient to bring about a healthy condition, in one suffering from obstructions, that are in their nature removeable—from substances that merely clog for a time without destroying structure—agents that can be decomposed into harmless elements, it does not follow that the same protective energy can create new tissues, and identical with those that have been destroyed, after their place has been filled by other formations.

The nature of some remedies is to control the vital actions by suffering a decomposition of themselves. They become, as it were, the food of the diseased organisms, and impart to them the elements required to bring them into a normal state. This is peculiarly the case with organic remedies. The inorganic substances which are used as medicines, are, many of them, such as do not enter into the animal formations. Copper —arsenic—antimony—bismuth—mercury, for example. When these produce a supposed salutary effect in morbid conditions, it is difficult to determine the mode of operation, unless it be by changing seats of irritation, and instituting new diseases, and giving to the new action a specific power to withold the irritating agent, whatever it be, from the primary point of attraction. That the new action is a disease, none can deny, and it is the caution alone of the physician, that prevents its running beyond control, and ending in complete disorganization of some portions of the animal structure. Even with the most careful, in some peculiar instances, these agents disorganize dreadfully, and eventually destroy life.

After having given this outline of the most probable action of medicines upon the organisms, the question recurs, what is the action of mercurial preparations upon the living animal tissues? The books inform us no further than our own observation has taught, that it causes secretions of various glands—that it allays inflammation, and sometimes causes inflammation—that it breaks up certain specific actions—that it is an alterative. They do not instruct as accurately as to the chemical character of the secretions they induce—whether those secretions are the specific fluids of the parts, or fluids loaded with broken down structures, such structures as cannot be lost with impunity. They do not give the quantity of the most highly vitalized portion of the blood that is destroyed under the action of mercury when it is used to arrest inflammation,—they do not even inform us intelligibly where syphilis ends, and mercurial disease begins,—nor do they explain, in a manner becoming the times,

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what they mean by an alterative. The best authorities on the use of mercury, give such contradictory statements of its utility, in certain diseases in which they all have had equal experience, and opportunities for investigation, and they account so differently, and at the same time so unphilosophically for the results observed, that we cannot, with the lights of modern chemistry and structural combination to direct us, place much confidence in what they teach. It is unsatisfactory to assert, that in certain conditions of the system, such as the cancerous, scrofulous, cachexia, or leucophlegmatic, that mercury is inadmissible, when the highest power claimed for it is that of an *alterative*. It is unfair to speak of its wonderful effects in curing those diseases in which no organic changes have taken place, and in which the powers of life are sufficient, of themselves, to restore the healthy action, even under the difficulties of an interfering treatment. In such cases the evidence of the direct beneficial agency of mercury is wanting, and when it is well known that as great a number similarly affected, recover without its use, the value of mercury is considerably depreciated.

Inflammatory action, indicated by an increased temperature of the part affected, and as it progresses in extent, by an accelerated movement of the arterial system, is allayed by withholding the oxygenated globules of the blood from the part. This is done either by diminishing the quantity of blood, or inviting its oxygen to some other point, where it can enter into combination either with worn out structure, some secretion, or some agent introduced into the system immediately for the purpose. The conditions favorable to rapid spread of inflammation, are mechanical irritation of the part—exalted temperature—much food containing nitrogen—and want of sleep. Mechanical irritation causes movements that waste those powers of life, which are antagonistic to the decomposition of the structure. Every movement is attended by a loss of structure, and this loss is brought about by oxygen combining with the structures that are put in motion. Hence, the more a part is irritated, the greater the amount of oxygen consumed, and in proportion to the quantity required, will be the flow of blood to the seat of inflammation. A high temperature increases mobility by exalting the action of the nerves, which hurries all the phenomena of the part to a consummation that would be retarded or prevented if heat were abstracted. Nitrogenous food being essential to the blood globule, can be withheld advantageously when there is an excess of these carriers of oxygen. It is a natural and safe abstinence. No organs suffer in consequence, beyond the ordinary casualties of a healthful life. They are merely weakened in their func-

tion from want of supply, and are ready to assume their full powers when appropriate nourishment is administered. Instinct teaches forbearance, and points to the kind of nourishment required in inflammatory conditions. Fruits, and particular kinds of vegetables, such as contain scarcely any nitrogen, are relished, whilst meat is rejected. Sleep allays inflammatory action. Rest of all the voluntary muscles makes the demand for oxygen less than when they are in motion. Hence, less oxygen is taken in during sleep, less circulation of it through the structure that is suffering from its action, and as, during sleep, the vital forces are accumulating, there is a greater resistance made to the agents of decomposition. The reasonable treatment, then for inflammatory diseases, is to act in accordance with the laws that control the actual changes that are taking place. If we disregard them, when the experience of the best observers of all ages has given us the very remedies that modern research has proved exactly suited to the emergency, and in their place select others of doubtful utility, or others again decidedly at variance with every law of life, we place the treatment of disordered animal functions in a more degrading position than the repair of a steam engine.

If we arrest inflammation by mercury, that is, prevent the oxygenation of the tissue in which it exists, we do it not directly by witholding oxygen globules, as by blood letting, or by non-nitrogenous food; not by lowering temperature, so as to lessen chemical affinity; not by rest, which strengthens the vital forces, but by an uncertain and dangerously indirect way. If mercurial preparations are not taken into the circulation, but reduce inflammatory action by catharsis alone, they stand by the side of many mild cathartics and are not to be preferred, because they sometimes produce effects not intended, and highly deleterious. If the salts of mercury, enter the circulation and produce their specific effect, inflammation is overcome by their action upon the oxygen globule. The albuminous principles of the blood are deranged by the bi-chloride of mercury, the form this metal generally assumes when it enters the circulation, the hydrochloric acid of the gastric and dermoid fluids yielding the equivalent to form this salt from the preparations of mercury generally administered. Both chlorine and mercury are destructive to albumen. They destroy the vitality of the blood. They enter into combination with its elements, and form products that are thrown out of the system by all the emunctories that can discharge carbonic acid, sulphuretted hydrogen, ammonia, and such liquid solutions as envelope the offending agents. The salivary glands pour forth their fœtid discharge,—the skin and the lungs exhale their offensive gasses,—the liver discharges

the elements of tissues that have been violently broken up,—the kidneys remove such effete matter as comes within their peculiar circle. Mercury disturbs every function, because that element, essential to the maintenance of health, ceases to penetrate its accustomed tissues. The oxygen that is taken in by the respiration, finding at almost every point, organized matter without vitality, enters into combination with it, to form various inorganic products. Hence, the cause of inflammation ceasing at the seat of disease—there is no oxygen to spare to carry it on.

Accompanying this arrest of specific inflammation by mercury, there is a general disturbance of the system. The blood being vitiated by a destruction of its vital components, dead matter is carried to all the organisms, and the grand struggle begins between the living and inorganic forces. In many cases, the waste is thrown out of the system, and the peculiar difficulties, under which the patient suffered, pass away, and the case is considered cured, and that too, perhaps, with a promptness equal to the risk. In other cases the destruction occasioned by mercury is too great to be overcome. Structures are dissolved beyond the recuperative action of the organs, and a broken down system, or death, is the consequence. Thus in administering mercurial remedies, we cannot know the extent to which their peculiar action will be carried. It acts beyond the limits intended. If it only reduced the excess of oxygen globules in cases of inflammation, did not destroy albuminous compounds, and vitiate the molecular structures, we could trust it more as a curative agent.

None suffering under exanthemous diseases can safely receive mercury into the circulation, for it prevents the oxygenation of that morbid matter, the uninterrupted removal of which is the natural restoration to health. Mercury being the grand antagonist to healthy oxygenation in the tissues, the enlightened physician will discriminate by a correct molecular pathology, those cases in which it is entirely inadmissible.

It follows, from the combining affinities of the different preparations of mercury, that none but the most robust can take it into their circulation without obvious injury, and even in their cases the safety is questionable. If obstructions exist, such a degeneration of tissues into formations of parasitic vitality, in which the living forces barely control decomposition, the destruction of those forces in the blood, and the tissue forming cells, overcomes the balance, and the morbid structure, no longer checked, softens and runs into utter decomposition.

TRENTON, N. J., *Jan.* 1853.